

Pledge Agreement

YES! I will support YMCA Strong Communities Campaign Challenge

I want to offer a local family an opportunity to enjoy the lasting benefits of swimming, sports, fitness, family focused activities and quality time together.

This donation is being made on behal	lf of abusiness or _	an individual	
Name: <i>(please print)</i>			
Mailing Address:			
City:	Prov:	Postal Code:	
Main Contact:			
Main Contact Job Title:			
Phone:	Email:		

Support a family in need with a yearly pledge of \$1,200 (\$100/month). Your contribution, no matter the amount, makes a meaningful impact. Please fill out the details below.

I will make a total contribution of \$	to be donated as follows:		
 Annual donation of \$ Monthly installments of \$ One-time donation 	for 3 years for a total of	installments	

The start date for annual or monthly donations will be:

______/____/_____ Day Month Year

DONATION OPTIONS

1. Donate online (monthly or one-time) with Credit Card, Pay Pal or Google Pay at **ymcaowensound.on.ca**

2. Pre-authorized debit starting on* <u>15th</u> / <u>(dd/mm/yyyy)</u> Please attach a void cheque. *All pre-authorized monthly payments are processed on the 15th of the month.

3. In person one time donation at the Welcome Desk in the YMCA Health, Fitness & Aquatics facility by cash, debit or credit (MC or Visa), or by mail to 700 10th St E, Owen Sound N4K 0C6 via cheque (payable to YMCA of Owen Sound Grey Bruce), or by phone at 519-376-0484 with your credit card.

CONFIDENTIAL

YMCA of Owen Sound Grey Bruce 700 10th Street E., Owen Sound, ON N4K 0C6 519-376-0484 x222 Charitable Registration # 11907 4995 RR0001



RECOGNITION

□ I give permission to the YMCA to publish my name and donation on social media and other channels to help encourage more donations from our community

- \Box I would like my name to appear on the donor recognition plaque at the YMCA
- D Please send me a digital certificate to display, acknowledging my contribution and support
- □ (for donations \$5,000 +) My donation may be recognized in the YMCA member newsletter

For the purposes of recognition, I/we would like my/our name to appear on the YMCA donor plaque as follows:

OR, please check \Box if you wish your contribution to remain anonymous.

All donations receive a personalized thank you letter and tax receipt.

Did you know?

You can make your donation in honour or in memory of a special person or group of people.

I wish to make my gift 🛛 in honour of 🖓 in memory of: _____

We're pleased to notify them/their family that they have been honored or memorialized in this way.

Notify Family Yes No ... if yes please provide Contact Details below:

THANK YOU for supporting the YMCA Strong Communities Campaign! With you unwavering commitment and partnership, **we can build a brighter tomorrow together.**

We understand circumstances can change: should you need to adjust your pledge, please contact us at <u>fundraising@osgb.ymca.ca</u> or 519-376-0484.

Your privacy will always be respected. For more information, please visit <u>https://www.canadahelps.org/en/privacy-policy/</u>

Supporter Signature

Date

YMCA Staff Signature

Date