

YMCA of Vincennes

2019 Annual Campaign

**TOP PORTION FOR CAMPAIGNER USE;
LOWER PORTION TO BE SHARED WITH DONOR**

Donor Information:

Jane Doe

Home Phone:

Bus. Phone

Cell Phone:

E-Mail:

Member ID: 47797

Campaigner:

Pledge Amount: _____

Matching Gift: Yes No

Company _____

Amount: _____

- Will give Send information
 Undecided Change e-mail
 Declined to give Remove e-mail
 Remove from mailing list

New Address: _____

New E-Mail: _____

New Phone: _____

Profile:

Giving History:

As of 2/12/2019

Campaign	Pledged	Paid
2018	\$1,000	\$1,000
2017	\$500	\$500
2016	\$500	\$500
2015	\$200	\$200

Suggested Follow-up and Comments:

Suggested Giving Amount: _____



Make checks payable to:

 YMCA of Vincennes
 2010 College Ave
 Vincennes, IN 47591
 United States

 Member ID:
 Home Phone:
 Business Phone:

Campaigner:

Total Pledge Amount: _____

Payment Options:

- I wish to pay in full.
 I wish to set up an auto draft for my payments.
 Don't draft me; please send a reminder for my pledge payments.

Payment Method:

- Credit Card: Visa MC AMEX Discover
 Acct #: _____ Exp Date: _____
 Bank Draft (Attach voided check)
 Full Payment Enclosed

Payment Schedule:

- Weekly Monthly Quarterly
 Semi-Annually Annually
 Start Date: _____ End Date: _____
 Donor Signature: _____