



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

YMCA ANNUAL GIVING PLEDGE CARD

Name _____

Primary Phone _____

Address _____

Best Email _____

City _____ State _____ Zip _____

My birth month _____ and year _____.

Please accept my Total Gift of: \$ _____

This gift is my:

___ Individual Gift _____

___ Donor Advised Fund _____

___ Corporate Gift _____

___ Foundation _____

This gift is eligible for a company match ___Yes ___No

Company Name _____

Amount of the match: \$ _____

Notes about my gift: _____

Remittance of Gift

• *Payment requests will be emailed monthly unless otherwise noted.*

• I will fulfill this gift through:

• ___ monthly payments ___ quarterly payments

• ___ one time payment month of _____.

• **No payment reminder is needed because:**

• ___ Payment will be sent by my employer through payroll deduct.

• ___ This gift will be coming from United Way. I donor-designated to the Y by documenting the YMCA on my United Way pledge form.

• ___ I am a YMCA Member. Please add \$ _____ to my current monthly draft.

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My Recognition Preference Gifts of \$240 and above are recognized.

___ Please acknowledge my gift by listing my name as _____ ___ No recognition, please.

Notes about recognition: _____

Donor's Signature _____

Date _____

Name of the Y Volunteer/Staff who called on me _____

The YMCA of Greater Des Moines Financial Development office provides administrative support to the YMCA branch locations.

Please return this form via email to: DonorRelations@dmymca.org OR Mail it in: **501 Grand Ave, Des Moines, IA 50309.**

To reach the YMCA Association Development office, please **call 515-471-8517.** **THANK YOU FOR YOUR SUPPORT!**

Please note that gifts submitted for payment via credit card will incur a 3% service fee.