



# COMMUNITY STARTS HERE



**\$1,000** - Provides six youth one week of summer day camp.

**\$500** - Helps a Single Parent Family with a YMCA membership for a full year.

**\$250** - Gives a family more than two weeks of Before & After School Care.

**\$100** - Helps teach a child valuable skills with swim lessons.

**\$50** - Provides an Active Older Adult with an activity with peers easing social isolation.

Waldo County YMCA  
157 Lincolnville Avenue, Belfast, Maine 04915  
207,338,4598 • www.waldocountnymca.org  
A 501(c)(3) Charitable Organization

## INVESTING IN OTHERS 2019 Annual Giving Campaign

### DONOR INFORMATION:

Name/Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Preferred phone #: \_\_\_\_\_  
Email: \_\_\_\_\_

### LEVELS OF GIVING

Chairperson's \$1,000+     Character \$100 - \$499  
 Executive \$500 - \$999     Partner \$1 - \$99  
 My gift will be matched

\_\_\_\_\_  
Name of Employer if Matching  
(Please include completed Employer Matching Form)

### PAYMENT METHOD:

Cash  
 Check enclosed; payable to the Waldo County YMCA  
Credit Card:     Visa     Master Card  
Name on Card: \_\_\_\_\_  
Card #: \_\_\_\_\_  
Exp. Date: \_\_\_\_ / \_\_\_\_ CVC Code: \_\_\_\_  
Bank Draft:  Checking     Savings  
Signature: \_\_\_\_\_

### PAYMENT FREQUENCY:

One Time  
 Monthly (15th of each month)  
 Quarterly (15th of March, June, Sept, Dec)

### GIFT RECOGNITION:

I (we) wish to remain anonymous  
 I (we) wish to be recognized publicly  
 I (we) wish to recognize someone else  
In Honor of: \_\_\_\_\_  
In Memorial of: \_\_\_\_\_

### ENDOWMENT:

I (we) would like to be contacted to discuss options for creating a legacy with the Waldo County YMCA.