



**YMCA of Greater Springfield
2019 Annual Campaign GIFT FORM**

Donor:

Personal or Business Donation: Personal Business
 Mr. Mrs. Ms. Miss Other (please specify): _____

Personal Name(s) or Business Name: _____

Business Contact Name/Title for acknowledgement: _____

Address _____

City/State/Zip _____

Best Phone Number: _____ Email: _____

Email _____

Gift Amount: I (we) will donate \$_____ to the YMCA Annual Campaign

Please check ONE: Greatest need
 Other (please specify) _____

Matching Gifts: My gift will be matched by _____
(company/foundation/family)
 Form enclosed I Will forward form to the YMCA

Planned Giving: Please contact me about putting the YMCA in my estate plans/will.

Payment Method: I made my donation On Line at: www.springfieldy.org
 Use my system credit \$ _____
 Cash Check payable to: *YMCA OF GREATER SPRINGFIELD*
 Credit Card via DAXKO

Monthly with Membership (account on file) amount: \$ _____ mo.

Monthly on another account (account on file) amount: \$ _____ mo.

One-time: Visa or Mastercard (circle one)

Card Number _____

Exp Date _____ CSV _____

Name as it appears on card (please print): _____

Signature _____ Date _____

New Bank Draft (Requires void check) or On File

Signature _____ Date _____

Payment Authorization: Donor Signature & Date:

_____ Date: _____

5.30.2018 rev.

YMCA Staff: Full Name: _____

Association Camp SV/LVSTRG Springfield Y-AIM Youth Dev.

DAXKO entries must provide this form, a copy of the DAXKO receipt, and copy of check if applicable