

A GREATER IMPACT



BOOTHBAY REGION YMCA

PLEDGE FORM

Thank you for your commitment to the Boothbay Region YMCA and your support of the people, places, and programs that make the Y a special resource in our community. This pledge form ensures donor intent and provides documentation for our records.

Pledges can be paid out over a period of five years with cash, gifts of stock, payment via credit card, and on a monthly or one-time basis, or a combination. The Y's EIN Number is 01-0237912. Please contact the Development Office for stock transfer information and/or wiring instructions.

Full Name(s): _____

Mailing Address: _____

Primary Phone (s): _____

Name

Name

GIFT INFORMATION

TOTAL A Greater Impact GIFT AMOUNT \$ _____ One-Time Gift Pledge

TOTAL YMCA Annual Fund GIFT AMOUNT \$ _____ One-Time Gift Pledge

TOTAL Camp K Fund GIFT AMOUNT \$ _____ One-Time Gift Pledge

For recognition purposes, please list my/our name in the Annual Report as (please print)

ex. Mr. & Mrs. John Doe, Jill and Jack Smith, etc. I/we wish to remain anonymous

This gift is made in honor of in memory of _____

I/we will request a matching gift from an employer Yes No N/A

FOR PLEDGES ONLY

My/our total A Greater Impact gift amount will be paid over (number) _____ years (up to five years) in installments of \$ _____ on a monthly quarterly or annual basis. The first pledge payment will be on or about _____. Please send pledge reminders.

My/our total YMCA Annual Fund gift amount will be paid over (number) _____ years (up to five years) in installments of \$ _____ on a monthly quarterly or annual basis. The first pledge payment will be on or about _____. Please send pledge reminders.

My/our total Camp Knickerbocker gift amount will be paid over (number) _____ years (up to five years) in installments of \$ _____ on a monthly quarterly or annual basis. The first pledge payment will be on or about _____. Please send me pledge reminders.

OVER

PAYMENT INFORMATION

Check enclosed or will be mailed: Please make payable to the Boothbay Region YMCA

Credit Card: Visa MasterCard American Express Discover

Name on Card: _____

Credit Card Number: _____

Expiration Date: ___/___/_____

Security Code: _____

Stock Transfers: I/we will set up an asset transfer for \$_____ with (type of security)_____

PLANNED GIVING INTENTIONS

I/we would like to make a new provision in my estate plans.

Please contact me/us for a confidential conversation.

I/we have made a provision in my/our estate plans:

I/we are already recognized as a member of the **Heritage Association**

I/we would like to be recognized with a plaque on the wall inside the Y as **Heritage Association** members.

DONOR SIGNATURE(S)

I/we will make pledge payments in cash, publicly traded stocks, bonds, or a combination of those assets. The BRYMCA understands that a donor's circumstance can change during the life of a pledge and the BRYMCA requests a confidential conversation and/or documentation in writing if a situation arises and a pledge cannot be fulfilled.

In the unusual event that the Y does not expend all donated funds and the interest earned therein, the Y shall notify the donor. It shall be within the donor's sole discretion whether to direct the Y to retain or return such funds. Should the donor require the return of the unexpended funds and interest earned thereon, the Y shall return the funds in a timely fashion.

Donor signature(s) _____ Date _____

BRYMCA Representative _____ Date _____

FOR MORE INFORMATION OR QUESTIONS, CONTACT:

Andy Hamblett
Executive Director
ahamblett@brymca.org
p: 207.633.2855 x234
c: 207.557.3849

or

Allyson Goodwin
Director of Development
agoodwin@brymca.org
p: 207.633.2855 x290
c: 413.522.5442

PLEASE RETURN COMPLETED FORMS TO:

Boothbay Region YMCA
Development Office
261 Townsend Avenue, PO Box 500
Boothbay Harbor, ME 04538

The Development Office will send a copy of this form to you for your records.