Monthly Donation Bank Draft Form

Every dollar you give is invested right here in our community through programs that support food insecurity, blood drives, Title I school, chronic disease and diverse abilities programs.

MEMBERS ON BANK DRAFT

Name						 	 _
Member ID							
YES! I wan	t to help t	the Y cre	ate A Bet	ter Us wit	h a gift of:		
\$5	\$10	\$15	\$20	\$25	Other: \$		

Recognition Name_

Recognition **may** include, but is not limited to, social media, monthly newsletter, facility signage, annual gala, print media, website.

___ I do not wish to be recognized publicly.

I agree to be **automatically drafted** monthly for the indicated amount above to my account on file in support of the YMCA Mission Programs.

Signature ____

Please return completed forms to the Hamilton Area YMCA at 1315 Whitehorse-Mercerville Road or e-mail jmorgan@hamiltonymca.org.

Information filed with the Attorney General concerning this charitable solicitation may be obtained from the Attorney of the State of NJ by calling 973-504-6215. Registration with the Attorney General does not imply endorsement. EIN #21-0702879

Monthly Donation Credit Card Draft Form

Every dollar you give is invested right here in our community through programs that support food insecurity, blood drives, Title I school, chronic disease and diverse abilities programs.

NON MEMBERS & MEMBERS CREDIT CARD DRAFT

Name
Address
City, State, Zip
YES! I want to help the Y create A Better Us with a gift of:
\$5\$10\$15\$20\$25 Other: \$
Credit Card #
Expiration CSV
Recognition Name
Recognition may include, but is not limited to, social media, monthly newsletter, facility signage,
annual gala, print media, website.
I do not wish to be recognized publicly.
I agree for my credit card to be automatically drafted monthly for the indicated amount above

to my account on file in support of the YMCA Mission Programs.

Signature

Please return completed forms to the Hamilton Area YMCA at 1315 Whitehorse-Mercerville Road or e-mail jmorgan@hamiltonymca.org.

Information filed with the Attorney General concerning this charitable solicitation may be obtained from the Attorney of the State of NJ by calling 973-504-6215. Registration with the Attorney General does not imply endorsement. EIN #21-0702879