



MIAMI COUNTY YMCA THE TIME IS NOW TO BUILD...

...A Y TO SERVE EVERYONE

...A Y TO PROMOTE HEALTHY LIVING

...A Y FOR FUTURE GENERATIONS



Yes, I/we believe in the need for a new state of the art, YMCA in Piqua.

Amount of Pledge: _____ Amount Enclosed: _____

Additional Pledge Details: _____

I WOULD LIKE MY PLEDGE TO BE PAID: One Time Monthly Annually
 1 year 2 years 3 years 4 years 5 years Starting: _____ Month _____ Year

***ACH BANK DRAFT:** Checking Savings
Bank _____ Acct. # _____ Routing # _____

***ACH CREDIT CARD DRAFT:** Master Card Visa Discover American Express
_____ Exp. Date _____ 3 Digit Security # _____

*ACH Draft option is available for One Time and Monthly payments only.

Name _____ Signature _____

Address _____

City _____ State _____ Zip Code _____

Email Address _____

Name for Purpose of Recognition _____ In Memory In Honor _____



TO DONATE ONLINE: www.miamicountyymca.net/donate
PLEASE MAKE CHECKS PAYABLE TO: Miami County YMCA
RETURN TO: James D. McMaken
Miami County YMCA
223 W. High Street
Piqua, OH 45356

It is my understanding that this document sets forth my wish and intention to make this gift-investment to the YMCA because I strongly believe in its value to the community. I understand that this does not represent a legal obligation, but rather a moral obligation. In the event of my demise prior to fulfillment, my estate will not have a legal obligation to complete this debt, although it would be my wish for it to do so.

Volunteer: _____

Division: _____

CAMPAIGN PLEDGE FORM