



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Y Alumni Pledge Card – Region Room Naming

YMCA Blue Ridge Assembly

I believe in the work of YMCA Blue Ridge Assembly and want to support its capital efforts. Therefore, I am committed to giving \$ _____ to the Capital Campaign over a _____ year period.

My monthly/quarterly/annual payment of \$ _____ will begin _____, 20____, and I will complete my pledge by _____, 20____. *This campaign allows for a maximum of a 5-year payment period.

Name _____ Phone _____
Street Address _____
City _____ State _____ Zip Code _____
Email _____

CONTRIBUTION METHOD

If making a pledge, send reminders: Annually Semi-annually Quarterly beginning in _____ (month/yr).

OR

Make a One Time Gift

Payments may be made by one of more of the following ways:

- Cash/Check (checks payable to YMCA Blue Ridge Assembly)
- Credit Card - Visa MasterCard Discover American Express
Card # _____ Expiration Date _____ CVC _____
Name on Card _____ Zip Code _____
- Bank Draft - Monthly Amount \$ _____ Withdrawal Date: (Circle One) 1st or 15th
(Please include voided check with pledge form)
- Stocks - Stock transferred directly to YMCA Blue Ridge passes without capital gains and maximizes your giving potential. Please speak to your financial advisor for information specific to your needs.
ACCT #1361161217 DCT #0057

Signature _____
Date

ACKNOWLEDGMENT

Please print name as you would like it to appear in formal recognitions and/or publications:

My gift is in memory of/in honor of/other _____

My gift will be matched by _____ Company Foundation Family

I would like to remain anonymous in all recognitions and/or publications.

For questions, call Suzette Armatas at 828.210.8480. Email pledge forms to sarmatas@yblueridge.org, or mail to Suzette Armatas, 84 Blue Ridge Circle, Black Mountain, NC 28711.

*Contributions are deductible for income tax purposes in the manner and to the extent provided by law.
Federal Tax ID # 56-0532130*