



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

2019 YMCA OF THE PIKES PEAK REGION ANNUAL SUPPORT CAMPAIGN
**BUILDING A MOUNTAIN OF
POSSIBILITIES FOR A BETTER US**

2019 BRIARGATE YMCA ANNUAL SUPPORT COMMUNITY PLEDGE FORM
LEVELS OF GIVING

\$1,000 Gift

Provide 4 teens the tools to reach their full potential by touring colleges and having an experience of a lifetime.

\$500 Gift

Six youth are safe and actively engaged 5 days a week in before and after school care.

\$250 Gift

Six future friends learn sportsmanship and skills with Y sports.

\$100 Gift

Four children of our community can learn to swim and be safe around water.

I PLEDGE

- \$1,000 \$500 \$250
 \$100 Other \$ _____

PLEASE SEND MY GIFT TO

To the Briargate YMCA

Full Name _____

How would you like to be recognized? _____

Gifts of \$100 or more will be listed in our annual report.

I wish to remain anonymous.

Address _____

City _____

State _____ Zip _____

Preferred Phone _____

Email Address _____

Campaigner Name

**I WISH TO UTILIZE THE
COLORADO CHILD CARE
CONTRIBUTION TAX CREDIT**
(minimum gift of \$250)

BUSINESS NAME (if a company gift)

- My company will match my gift
 I'm not sure if my company will match my gift, please look up

PAYMENT OPTIONS

Please check only one of the following:

- My gift is **enclosed** in full amount of \$ _____
 Cash Check
- Please charge my **credit card** \$ _____
 Monthly Quarterly* Once in the month of _____
- I would like to add my gift to my **YMCA Membership** Draft
 One time, **Lump Sum** in the month of _____
 Monthly payments of \$ _____ through December 2019
(Terms & Conditions of the original bank withdrawal agreement apply. Additional funds for the purpose of charitable contribution will only be withdrawn through December 2019.)
- Please send me an **invoice**
 Monthly Quarterly* Once in the month of _____

*Quarterly: March, June, September and December

Please make checks payable to YMCA of the Pikes Peak Region.

CREDIT CARD INFORMATION

Please check only one of the following:

- MasterCard Visa Discover AMEX
- Name on Card _____
- Account Number _____
- Expiration Date _____ V-code _____
- My address for this card is the same as above.
If not, please list below.
- Card Address _____
- Signature _____ Date _____

IT IS MY INTENT TO PAY THIS GIFT BY ONE OF THE FOLLOWING OPTIONS

*It is requested that gifts be paid in full by December 31, 2019

Signature _____ **Date** _____



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

BRIARGATE
YMCA



THE BRIARGATE FAMILY CENTER YMCA IS SPECIAL.

It is more than a cardio floor full of treadmills, a studio of classes, a gym to shoot hoops or a place to swim. The Briargate Family Center YMCA is a place of caring and passionate staff, volunteers and members committed to meeting the diverse and ever-changing needs of the community. Here are a few examples:

- Providing Support and Respite to Military Service Members & Their Families – Giving Back to Those Who Served
- Staying Healthy Longer – Connecting and Engaging Seniors
- Eliminating Drowning – Safety Around Water
- Preventing Chronic Disease – Evidence-Based Health Intervention Programs
- Developing Leaders – Tween and Teen Programs

Most importantly, the Briargate Family Center YMCA is a welcoming place FOR ALL and every day we transform lives. Because of generous donors who contribute to our Annual Support Campaign, everyone can experience what the Y has to offer regardless of their financial circumstances. Together we can achieve a Mountain of Possibilities.



ppymca.org/donate

2018-2019
Annual Support Campaign
YMCA OF THE PIKES PEAK REGION