



YMCA OF THE PIKES PEAK REGION

2026 ANNUAL SUPPORT CAMPAIGN

PLEDGE FORM

Step 1

I PLEDGE A GIFT OF

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

Please direct my gift to the following Y program or center

- ☐ I WISH TO UTILIZE THE COLORADO CHILD CARE CONTRIBUTION TAX CREDIT (minimum gift of \$250 required)
- ☐ MY EMPLOYER WILL MATCH MY GIFT Employer Name _____

Step 2

YOUR CONTACT INFORMATION AND RECOGNITION PREFERENCES

Your Name _____

☐ This is a gift from the following business _____

Address _____

City _____ State _____ Zip _____

Preferred Phone _____ Email Address _____

Would you like to be recognized or remain anonymous? ☐ Remain anonymous _____

☐ Be recognized as: _____

My gift is ☐ in honor of ☐ in memory of the following individual: _____

Step 3

PLEASE SELECT YOUR PAYMENT METHOD

☐ **Option 1:** Full payment enclosed via cash or check made out to the YMCA of the Pikes Peak Region

☐ **Option 2:** Pay online at ppymca.org/give

☐ **Option 3:** Send me an invoice for \$ _____

☐ Monthly ☐ Quarterly* ☐ Once in _____ (Month)

☐ **Option 4:** Please charge my credit card

☐ Monthly ☐ Quarterly* ☐ Once in _____ (Month) for \$ _____

Name on card _____ ☐ MasterCard ☐ Visa ☐ Discover ☐ AMEX

Credit Card Account # _____ Exp _____ CVV _____

Billing address (if different from above address) _____

Signature _____ Date _____

* Quarterly invoices and credit card payments will be process on the first day of the months of March, June, September and December.

Step 4

It is my intent to pay this gift as outlined above

*It is requested that gifts be paid in full by December 31, 2026

Signature _____ Date _____

STAFF USE ONLY

Pledge Taken _____