

ANNUAL CAMPAIGN



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

OWEN COUNTY FAMILY YMCA

1111 W State Hwy 46, Spencer, IN 47460

Phone: 812.828.9622

www.owencountyyymca.org

CAMPAIGN PLEDGE FORM



MY COMMITMENT

\$50 \$100 \$150 \$250 \$500 \$1000 Other \$ _____

PAYMENT METHOD

- Check (enclosed payable to the Owen County Family YMCA)
- Debit my Membership Account (Members Only)
- Payroll Deduction (YMCA Staff Only)
- Credit Card (Visa or Mastercard)

Number _____ Exp. Date _____

Name _____

Company Name (if applicable) _____

Signature _____ Date _____

OPTIONAL

My gift is In honor of In memory of Name _____