2025 YMCA OF HONOLULU ANNUAL CAMPAIGN DONATION FORM

Name		
Company —	□ Matches your gift?	
☐ Home ☐ Work Billing Address		
City	State	Zip
Day Phone Home Phone	Email	
RECOGNITION		
□ I wish to be listed in recognition materials as follows:□ I wish to remain anonymous		
CHECK ALL APPLICABLE: ☐ This is my first gift to the Y ☐ Send information about being a President's Club Member (\$ ☐ Send information about including the YMCA in my estate plan ☐ I have already included the YMCA in my estate plan ☐ Contact me about a gift of stock		
MY DONATION If applicable, who talked to you about making your gift?		
Branch Designation		
BILLING INFORMATION Amount Enclosed \$ Or Please choose one of the billing options below:		
One Time Gift Total Pledge: \$	Make It A Recurring Gift Until I Tell (Check one and fill in info)	You Otherwise:
☐ One Time Payment \$	☐ Annual Payment: \$	Month
Monthly Payment: \$ Starting Month	☐ Monthly Payment: \$	
Starting Month	☐ Quarterly Payment: \$	Starting Month
☐ Quarterly Payment: \$	a Quarterly Fuyinchia. \$	Starting Month
CREDIT CARD (You can also pay online at ymcahonolulu.org/do □ Mastercard □ VISA □ American Express	onate) □ Discover	
Name on Card		
Card Number	Exp	
BANK DRAFT		
I authorize the YMCA OF HONOLULU to draft my account. (Plea	ase attach voided check or deposit slip)	
Signature		SCAN TO DONATE ONLINE
	0073533	国家25回
The YMCA OF HONOLULU is a nonprofit 501(c)(3). Tax ID# 99-Your donation may be tax deductible – Mahalo!	·UU/3533.	
Donate online at ymcahonolulu.org/donate or send checks paya	able to YMCA OF HONOLULU.	情報報報

Please return form and payment to: YMCA OF HONOLULU, 1441 Pali Highway, Honolulu, HI 96813, or your local Y Branch.