



**FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY**



**BOYS & GIRLS CLUB  
OF THE  
WISCONSIN RAPIDS AREA**



**NAME** \_\_\_\_\_

**ORGANIZATION/COMPANY** \_\_\_\_\_

**MAILING ADDRESS** \_\_\_\_\_

**CITY STATE ZIP** \_\_\_\_\_

**MAIN PHONE #** \_\_\_\_\_ **CELL PHONE #** \_\_\_\_\_

**EMAIL** \_\_\_\_\_

I/We wish to **support** the **Joint Capital Collaboration** between the **Boys & Girls Club of the Wisconsin Rapids Area** and the **John E Alexander | South Wood County YMCA** with a donation as follows:

TOTAL GIFT \$ \_\_\_\_\_ with a \_\_\_\_\_ One-time gift enclosed or  
\_\_\_\_\_ Multi-year pledge | not to exceed more than 5 years

\$ \_\_\_\_\_ By: \_\_\_\_/\_\_\_\_/2017      \$ \_\_\_\_\_ By: \_\_\_\_/\_\_\_\_/2018      \$ \_\_\_\_\_ By: \_\_\_\_/\_\_\_\_/2019

\$ \_\_\_\_\_ By: \_\_\_\_/\_\_\_\_/2020      \$ \_\_\_\_\_ By: \_\_\_\_/\_\_\_\_/2021

\_\_\_\_\_ Please have someone contact me/us about making a planned gift.

\_\_\_\_\_ Does your company match gifts?    \_\_\_\_\_ NO    \_\_\_\_\_ YES \_\_\_\_\_  
Company Name

Method of payment:    \_\_\_\_\_ Check - checks made payable to South Wood County YMCA

\_\_\_\_\_ Credit/Debit Card    \_\_\_\_\_ Visa    \_\_\_\_\_ MasterCard

Name on Card \_\_\_\_\_

Card # \_\_\_\_\_ Exp Date \_\_\_\_\_ CID# \_\_\_\_\_

Recognition Name \_\_\_\_\_  
Please print

\_\_\_\_\_ I/We wish to be ANONYMOUS

\_\_\_\_\_ In honor of    \_\_\_\_\_ In memory of \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**GIFTS CAN BE MAILED TO:**  
**BUILDING FUTURES TOGETHER** CAMPAIGN | 211 Wisconsin River Drive | Port Edwards | WI | 54469

