



FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

## 2026 GIFT COMMITMENT

### YMCA OF MIDDLE TENNESSEE

#### DONOR SECTION

Donor/Spouse Name \_\_\_\_\_

Organization/Contact Name \_\_\_\_\_

Anonymous ☐

Address \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Gift Amount \$ \_\_\_\_\_

Center/Program Designation \_\_\_\_\_

#### CHOOSE ONE OF THE FOLLOWING PAYMENT OPTIONS:

☐ **Check**

- ☐ One-time in the month of \_\_\_\_\_  
☐ Quarterly  
☐ Monthly

Please send me reminders for my pledge via ☐ Email ☐ Mail

**- OR -**

☐ **Credit/Debit Card (auto-draft)** Please Note: We will need to call you to add a billing method if one is not already on file

- ☐ One-time in the month of \_\_\_\_\_  
☐ Quarterly  
☐ Monthly

Please send me reminders for my pledge via ☐ Email ☐ Mail

**- OR -**

☐ **I will go online to make my donation or pay my pledge**

TO GIVE ONLINE, VISIT [YMCAMIDTN.ORG/DONATE](https://ymcamidtn.org/donate)



☐ Yes, my employer has a matching gift program and I'll submit my gift to be matched!

☐ Yes, I'd like to learn more about joining the Heritage Club and leaving a legacy gift to the YMCA!

Signature \_\_\_\_\_

Date \_\_\_\_\_

\*Signature required in order to be processed

YMCA OF MIDDLE TENNESSEE TAX ID: 62-0476243

#### STAFF SECTION

Constituent ID \_\_\_\_\_

Appeal Name (board, race, major, etc.) \_\_\_\_\_

Soft Credit \_\_\_\_\_

Fundraiser/Solicitor \_\_\_\_\_

**Our Mission:** A worldwide charitable fellowship united by a common loyalty to Jesus Christ for the purpose of helping people grow in spirit, mind and body.