

MY COMMITMENT—Sponsor a youth in our YMCA Sports today!

\$50 \$100 \$150 \$250 \$500 **OTHER \$** _____

PAYMENT METHOD

CHECK (Enclosed Payable To YMCA)

Credit Card (Visa Or Mastercard)

Number _____ Exp. Date _____

Name _____

Signature _____ Date _____

OPTIONAL

My gift is _____ In honor of _____ In memory of Name _____

RICHMOND FAMILY YMCA

1215 S. "J". Street

Richmond , IN 47374 (765) 962-7504 or @ RICHMONDFAMILYYMCA.ORG

