



YMCA CAMP OF MAINE DONOR FORM

Gift Agreement

Annual Fund \$ _____

To Contribute to a Specific Campaign:

Endowment

PROJECT 218
(Scholarships/
Financial Aid)

Capital
Improvements

Program
Upgrades

\$ _____

\$ _____

\$ _____

\$ _____

Total Gift Amount: \$ _____

Check is
Included

I'd like to pay by
Credit Card*

Other Payment
Method*

My Information

* We will contact you for more information

Full Name: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Preferred Phone: _____

Email: _____

Recognition Name: _____

Gift in Honor/Memory: _____

Signature

STATE YMCA OF MAINE /
YMCA CAMP OF MAINE

305 WINTHROP CENTER ROAD / PO BOX 446
WINTHROP, ME 04364

Date

207-395-4200
www.maineycamp.org