

along with your donation to:

YMCA-YWCA of Winnipeg, Attn: Kevin Hunter, 301 Vaughan St, Winnipeg, MB R3B 2N7

At Y Winnipeg we empower individuals to reach their full potential through connection, belonging, and active participation in fostering a healthy self and community.

ywinnipeg.ca

## YES! I WOULD LIKE TO GIVE HEALTH AND COMMUNITY TO THOSE WHO NEED IT MOST

o.g	Contact Name (if applicable)		
Mailing Addres	ss		
	Street	City	Potal Code
	(cell)		
	ould like to give a one-time gift of \$		
	ould like to make a pledge of \$		year:
Please direct my donation to support:	<ul> <li>□ Area of greatest need</li> <li>□ Strong Kids Program</li> <li>□ Camp Stephens</li> <li>□ Heart of the City Campaign</li> <li>□ Other</li> </ul>		
□ I/We pre	ould like to be recognized as follows: efer to remain anonymous		
	MENT OPTIONS  ne today at ywinnipeg.ca/dona	ı <b>te</b> or select a gift payment optic	on below:
☐ Gift of Sec	urities (contact kevin.hunter@ymanitoba	.ca)	
□ Payments	of \$ made □ month	ly □ quarterly □ yearly starting	
☐ Cheque (p	ayable to YMCA-YWCA of Winnipeg) □ d: Type □ VISA □ MasterCard □ AmEx Nan	Pre-authorized payment (include voide	ed cheque)
Credit Card	d Number	ExpiresMM/YY	_ CVV