

DONOR COMMITMENT FORM

The following is my commitment to support CYC's mission and work on behalf of the youth in our community.

Name _____

Address _____

Email Address _____

Phone _____ Fax _____

A. I am making a contribution now by check in the amount of \$ _____ payable to CYC.

B. I am making a contribution now and please bill my credit card:

Visa _____ Exp. date: _____

Mastercard _____ Exp. date: _____

AmEx: _____ Exp. date: _____

Discover: _____ Exp. date: _____

Name as appears on card: _____ Credit card security number: _____

Billing address if different from above: _____

C. I am making a pledge to fulfill my contribution in _____ installments.

In 2007: Month & date: _____

In 2008: Month & date: _____

In 2009: Month & date: _____

D. I am interested in donating securities and please contact me. Yes No

E. Please contact me with information on:

The CYC Capital Campaign.

How I can include CYC in my estate planning.

How I can be part of CYC's fundraising team. I have ideas for CYC.

F. I work for _____ Please contact me about company matching programs.
(Company Name)

All contributions will be acknowledged in CYC publications and website unless otherwise requested.

I would like my contribution to remain anonymous.

Signature _____ Date: _____

CYC is a 501(c)(3) nonprofit corporation. Your contribution is tax deductible to the extent allowed by law. All donors are encouraged to consult their tax advisors for information. Tax ID#: 94-1728818

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