



# PIEDMONT FAMILY YMCA

## CAPITAL CAMPAIGN

### *Pledge Form*

I am pleased to commit \$ \_\_\_\_\_ on behalf of:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Piedmont Family YMCA  
Attn: Shelley Remaly  
442 Westfield Rd.  
Charlottesville, VA 22901  
(434) 974-9622 x13

### *Payment to be made as follows:*

Entire amount now

\$ \_\_\_\_\_ now and balance in full on or before \_\_\_\_\_, 20\_\_\_\_

*In payments of* \$ \_\_\_\_\_

Annually     Semi-annually     Quarterly     Monthly

First Payment Date: \_\_\_\_\_

Automatic bank draft or credit card - Please contact the YMCA

Or as follows: \_\_\_\_\_

\_\_\_\_\_

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

Note: \_\_\_\_\_

\_\_\_\_\_