

HELPING YOUTH SUCCEED



YES, helping at-risk youth is important to me.
I wish to contribute.

Name: _____

Address: _____

Phone: _____

Email: _____

Gift/Pledge Amount: \$ _____

Start Date: _____

Number of Payments: _____

Annually Semi-Annually

Monthly Other _____

Payment Option: Cash Cheque

*Make cheques payable to: "Youth Impact Jeunesse, inc"
(VISA & MasterCard option available by visiting www.youthimpact.org
and clicking "Donate Now")

Signature

Date

My donation may be publicly acknowledged: YES NO

(Name to appear on acknowledgement)



Charitable # 10822 8529 RR0001

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