



## DONATION FORM 2021

Please return to: Karina Willats at Foundation for Youth  
405 Hope Ave Columbus IN 47201  
karina@foundationforyouth.com

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

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

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

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

Please accept my gift of \$ \_\_\_\_\_

payable to "Foundation for Youth"

This gift is in honor of \_\_\_\_\_

This gift is in memory of \_\_\_\_\_

Please allocate my gift to: (circle one)

Where needed most

BGC    BBBS    CYC    Athletics    Aquatics    General Operating Expenses

Please contact me to discuss: (circle one)

Monthly Giving Circle    Planned Giving    Volunteer Opportunities