

Please accept my gift (or pledge) in the amount of \$ _____

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____

Email Address _____

My check or money order is attached.

Please make checks payable to BGC of Cairo-Grady County and mail to BGC, P.O. Box 710, Cairo, GA 39828

Please send an invoice to the email address listed above.

Please charge \$ _____ to my credit card: Visa or MasterCard

Card # _____ Exp. Date: _____

Please debit \$ _____ from my bank account: Monthly Quarterly Bi-annually One time contribution

ACH# _____ Account# _____

Bank Name _____



BOYS & GIRLS CLUB
OF CAIRO/GRADY COUNTY

Please send me info on:

- Volunteering
- Special events
- Sponsorship opportunities
- Including BGC in my will
- Gifts of securities
- Gifts of real estate
- Other _____

Please complete and return this form to BGC, P.O. Box 710, Cairo, GA 39828. All Gifts are fully tax deductible. Thank you for your support.