



Yes! I will help reach young people through the ministry of Young Life.

I/We would like to make a One Time/Annual gift of:

\$100 \$250 \$500 \$1,000 \$2,500 \$5,000 \$10,000 Other \$ _____

I/We would like to make a monthly commitment of:

\$75/month \$150/month \$250/month \$500/month \$_____/month

Payment Options:

- Check - Make check payable to Topeka Young Life
- Electronic Funds Transfer - see reverse side for form
- Credit Card - see reverse side for form

All contributions are tax deductible

Topeka Young Life
P.O. Box 4336
Topeka, KS 66604

Please complete before mailing:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____



Make your life easier...

Sign up for one of the two giving options below.

Electronic Funds Transfer

I authorize my bank to transfer \$_____ from my account to Young Life monthly. Please transfer my monthly gifts on the (CHECK ONE) ___5th___ 20th of every month.

Please include voided check.

NAME OF BANK _____

ACCOUNT NUMBER _____

SIGNATURE _____

DATE _____

Designation/area: KS54

Credit Card

I authorize Young Life to charge \$_____ from my credit card on the (CHECK ONE) ___15th___ 30th of every month.

TYPE OF CREDIT CARD _____

CARD # _____

EXPIRATION DATE _____

SIGNATURE _____

DATE _____

MONTHLY RECEIPT ___Yes. ___No.

Designation/area: KS54