

United Way of Weld County Campaign 2011- 2012

Name: _____

Address: _____

City, State Zip : _____

Phone: _____

Current E-Mail Address: _____

- Please send me United Way's E-newsletter
- Preferred method of correspondence: _____

Leadership Giving Clubs

Young Leaders Society	\$500
Sower	\$750
Planter	\$1,000
Cultivator	\$2,000
Harvester	\$5,000
Tocqueville	\$10,000

*Kenneth W. Monfort Society \$2,000
per year for three years or more.*

My pledge for 2011-12: \$_____ Loyal United Way Contributor for _____ Years.

- My gift is at the Leadership giving level. Please list my/our name in publications as follows:
- I/We wish to remain anonymous
- My contribution is in combination with another donor _____
- Register me for the United Way Young Leaders Society (18-40 years of age - \$500 or more)

Payment Options:

- I will be contributing through my workplace and complete my pledge through that process.
 - Check # _____ Enclosed (please make payable to United Way of Weld County)
 - Please Bill me by December 2011
 - Please Bill me quarterly, beginning February 2012
 - Please Bill me in _____ (month)
 - Please Charge my VISA/Master Card/Discover on _____ (date)
(Charge processed upon receipt unless otherwise indicated.)
- Acct. # _____ Exp. Date _____

Signature: _____ **Date:** _____

My Investment:

- United Way Community Care Fund (The most powerful way to invest your contribution)
- Helping Children Succeed (Programs that focus on the education, development, mentoring and safety of our children.)
- Promoting Self-Sufficiency (Programs that provide care/information and promote self-reliance, especially for seniors and residents who are disabled.)
- Engaging Youth (Programs that help youth achieve their full potential and become active citizens.)
- Meeting Basic Needs (Programs that provide help for all of us when we need it, including food, shelter and emergency services)
- Specific Organization or Other United Way (**Minimum \$50 per organization**) If designation does not qualify as a 501(c)3 charity, funds will become Community Care Investment). A 15% processing fee will be assessed to all designations.

_____ Organization Name _____ Organization Address

- Please release my name to the above named organization.

➤ Tell me about volunteer opportunities in my community