



Hastings Family YMCA
CHARITABLE DONATION REQUEST FORM

The following information is required in order for Hastings YMCA to consider your request.

Organization: _____ Date: _____

Organization's Contact Person: _____ Title: _____

Mailing Address: _____ City: _____ State: _____ ZIP: _____

Phone Number: _____ Email Address: _____

Contact person's relationship to the organization:

Employee ____ Volunteer ____ Paid Worker ____ Fund Raiser ____

What services are rendered by your organization/event? _____

How will this donation be used? _____

Why type of contribution are you seeking?

Desired Items: _____

By what date do you need the contribution? _____

What is your relationship with the Hastings YMCA? _____

Completed Charitable Donation Request applications and supporting documentation may be submitted by mail, fax or email:

Hastings Family YMCA

Attn: Charitable Donations Committee

P.O. Box 1065

Hastings, NE 68902

Fax: 402-463-3255

Please direct questions regarding Hastings Family YMCA Donations to Gwen Ruppert at 402-463-3139 or email gwenr@hastingsymca.net.

**FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY**

[Type here]

Internal Use Only

Date of Review: _____ **Approved:** _____ **Denied:** _____