

United Way



United Way of South Central Massachusetts

2022 PLEDGE FORM

GIVE. ADVOCATE. VOLUNTEER.

About YOU

NAME (Please Print) _____

HOME ADDRESS - Street _____

CITY _____

STATE _____

ZIP _____

EMAIL ADDRESS to receive Tax Receipt and UWSCM Updates _____

Phone Number Home Cell _____

EMPLOYER _____

Your SUPPORT

Accept the \$85 challenge for our 85th Anniversary!

(make a gift of \$85 or increase past gift by \$85)

PAYROLL DEDUCTION

WORKPLACE CAMPAIGNS ONLY

Number of Pay Periods

(Check one)

12 24 26 52 Other _____

Amount per Pay Period

(Check one)

\$5 \$10 \$20 \$ _____

Total Pledge Amount

\$ _____

Join our CIRCLE OF FRIENDS Affinity Group

"Giving and living UNITED to circle our community."

FRIEND: \$1-\$49

NEIGHBOR: \$50-249

IMPACT: \$250-\$499

ADVOCATE: \$500-\$999

LEADER: \$1,000 +

ONE-TIME GIFT \$ _____ (Specify payment method below)

- Cash or Check (Please make checks payable to **United Way of South Central MA** and attach to this form.)
- Credit Card (Visit www.uwscm.org/donate to process a secure donation online.)
- Bill Me Monthly Quarterly One-Time

Your IMPACT (Select Preference)

The **GENERAL FUND** of United Way of South Central MA: Total Amount Portion to UWSCM \$ _____
Maximize the impact of my gift, and improve the health, education, and financial stability of every person in our community.

or

Designate a portion to another **UNITED WAY** or **IMPACT AREA**. (Designations of \$52 or greater and you may select more than one.)

United Way of Central MA \$ _____ Local United Way that serves my hometown \$ _____ UWCM Women's Initiative \$ _____ (requires \$100 minimum)

Health

Education

Financial Stability

Our Endowment: Ensures sustainable funding for future generations \$ _____ (please indicate amount)

Your SERVICE

We live better when we **LIVE UNITED**. Tell us if you are interested in ways you can **GIVE, ADVOCATE, or VOLUNTEER**.

- Volunteer Opportunities Committees and Board Involvement Planned Giving/Bequests

Signature: _____

Date: _____

Please keep my donation anonymous

I authorize my weekly contribution to continue until otherwise noted. A new form must be filled out for designated gifts each year, otherwise they will rollover as gifts to the GENERAL FUND after one year. Gifts may be stopped at any time upon request. United Way of South Central MA does not provide goods or services in consideration of contributions to the organization by payroll deduction or direct gift.

Your donation will go to the GENERAL FUND unless otherwise specified.

United Way of South Central MA/ 176 Main St., Suite 400/ Southbridge, MA 01550/ (508)765-5491/ www.uwscm.org