



# Great Moments Donation Form

## Donor Information

Full Name \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, ZIP \_\_\_\_\_  
Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
Email \_\_\_\_\_  
Company/Organization \_\_\_\_\_

## Gift Information

My Gift Amount: \$ \_\_\_\_\_

*This is a:*

- One-Time Gift
- Check No. \_\_\_\_\_
- Pledge
- Recurring or Scheduled Payment Please schedule my payment for:
  - Monthly \$ \_\_\_\_\_ per month
  - Quarterly \$ \_\_\_\_\_ per quarter
  - Annually for \_\_\_\_\_ years
- Please contact me about planned giving or gifts-in-kind
- Eligible for company match.  
Company Name: \_\_\_\_\_
- I wish this gift to remain anonymous

Mail to:  
**Boys & Girls Club of the Lower Naugatuck Valley, 1 Positive Place, Shelton, CT 06484**