



SOUTH SHORE YMCA ANNUAL COMMUNITY APPEAL 2016

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Payment: ___ check attached (payable to South Shore YMCA)

___ please charge my credit card on file

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Amount of Donation: \$ _____

I work for a company that matches my donation. Company: _____
Please have your HR dept. mail us a form for the matching gift.

I am interested in planned giving. Please contact me.

**Questions? Please contact: Meghan Hill, Development Director,
mhill@ssymca.org; 508-428-2571. Ext 101**

**Please return to: South Shore YMCA, Camp Burgess & Hayward, 75 Stowe Road,
Sandwich, MA 02563**

Campaigner: _____ Team Name: _____

Branch/Event: CAMP BURGESS & HAYWARD ANNUAL COMMUNITY APPEAL