



P.O. Box 2096 • Santa Barbara, CA 93120-2096 • (805) 708-1292 • www.freedom4youth.org

GIVING FORM

You can share in our commitment to making a difference in the lives of our youth and in their future as the adults in our community! When you participate, your donation will be transferred conveniently each month from your checking account or credit card directly to Freedom 4 Youth.

Your donation will go even further because our paperwork will be reduced; our income will be more predictable, putting your donation to work immediately to help the people who are served by our mission.

Name(s) _____

Address _____

City _____ State _____ Zip Code _____

Telephone _____ Email _____

I'd like to make a _____ Monthly donation OR _____ One-time donation of \$ _____.

Please process my donation on the _____ 1st of the month OR _____ 15th of the month

I plan to make this donation in the form of _____ Checking Account OR _____ Credit Card

Credit Card Number _____ Expiration Date _____ / _____



Enclosed is a voided check OR credit card information for my donation. Please transfer my donation from my checking/credit card account. I understand my future donations will be transferred directly from my account as stipulated above. I understand that I may increase, decrease, or suspend my gift any time through the online donation form at www.freedom4youth.org or by contacting Freedom 4 Youth by phone or mail. All donations provided to Freedom 4 Youth originating as ACH transactions comply with U.S. Law.

Signature _____ Date _____

(Required)

KEEP THIS PORTION FOR YOUR RECORDS

You may increase, decrease, or suspend your gift any time through the online donation form at www.freedom4youth.org or by contacting Freedom 4 Youth by phone or mail. All donations provided to Freedom 4 Youth originating as ACH transactions comply with U.S. law.

For your convenience, record your donation \$ _____ _____ 1st of the month _____ 15th of the month

As a _____ Monthly donation OR _____ One-time donation