

**Yes, I'm happy to support YouthFriends!
My gift is in the amount of \$ _____.**

Name _____

Address _____

City _____ State _____ Zip _____

By credit card:

Number _____

___ Visa ___ MasterCard ___ American Express ___ Discover

Expires _____ CVV# (3 or 4 digit # on card) _____

Monthly installments (over 12 months) \$_____ per month.

Signature _____

By check:

Check enclosed in the amount of \$ _____ made payable to YouthFriends (YouthFriends, 1800 Baltimore, Suite 400, Kansas City, MO 64108 | Telephone 816.842.7082).

My employer will match my gift (please submit matching gift form from your employer).

My gift is in honor of: _____
(name)

(address)

(city, state, zip)