

Membership / Donation Form

eliminating racism
empowering women
ywca

Name: _____

Address: _____

City, State, Zip: _____

Email: _____

Membership Type:

Adult Female: \$30

60+ Female \$25

Youth (12-18) \$12

Donations/ Memorials

Contribution Amount: \$ _____

Contribution Designation

- YWCA General Fund
- YWCA St. James House
- YWCA Fun Factory
- YWCA Scholarship Fund

Memorial Information

In Memory / Honor of : _____

Name & Address of where acknowledgement should be sent.

Name: _____

Address: _____

Please make check payable to :

YWCA

201 N. Franklin St

Titusville, PA 16354

814-827-2746

Your gift will be acknowledged upon receipt. Thank you for your support.