



UNITED WAY
Greater Waterbury

Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone (cell): _____ (home): _____ Email: _____

Signature: _____ Today's Date: _____

Birth Date: Mo. _____ Day _____ Year _____

Annual Gift \$_____

Method of Payment: ☐ Check ☐ Credit Card ☐ Paid Online ☐ Stock/Securities (details will be forwarded to you at email/address above)

Bill me: ☐ Annually ☐ Quarterly ☐ Monthly

Credit Card No. / / / / / / / / / / / / / / / / / Exp. / / / / /

CVV# / / / / / Billing Zip / / / / / /

Donate securely online: unitedwaygw.org/Give



(203) 757-9855
www.unitedwaygw.org

Please see reverse side

Tell Us About Yourself

Please tell us how you would like to be recognized in United Way materials:

☐ I wish for all details of my gift to remain anonymous

☐ I have included United Way of Greater Waterbury in my estate plans

☐ Please send me information on United Way of Greater Waterbury's endowment and planned giving opportunities

I am a loyal contributor of United Way and have given regularly: ☐ 10 years or more ☐ 25 years or more

I am interested in: ☐ Emerging Leaders ☐ Volunteer Opportunities ☐ Women United

No goods or services were provided in exchange for your contribution.

THANK YOU FOR YOUR GIFT!