

Campaign Pledge Form

United Way of
Henry County & Martinsville



Participant's Information (Please Print Clearly)

Mr. Mrs. Ms. Dr.

Employer _____

First Name _____

Middle _____

Last Name _____

(Suffix) _____

Home Address _____

City _____

State _____

ZIP _____

Mailing Address: same as home address

City _____

State _____

ZIP _____

Primary Phone _____

Home
 Mobile

Preferred Email Address (sign me up for updates)

Secondary Phone _____

Home
 Mobile

Payroll Deduction

I will contribute the following amount
each pay period: \$ _____

Weekly (52)

Bi-Monthly (24)

Bi-Weekly (26)

Other: _____

Monthly (12)

Total Annual Gift Amount: \$ _____

One time Total Gift Enclosed

I have enclosed my gift
in the form of Cash / Check
Please make checks payable to:
United Way of HCM

I made a gift online at
www.UnitedWayofHCM.org
Payment Date: ____/____/____

Total Annual Gift Amount: \$ _____

Direct Bill Me

I authorize the United Way of Henry County & Martinsville
to **Bill Me** in the amount of \$ _____ at a
_____ (/yr) frequency as my Contribution
to the Annual Campaign.

Please allow my **initial billing date** to be as follows:

MM/DD/YYYY: _____

NOTE: Due to the nature of this transaction UWHCM
Requires a minimum of \$25 per billing period.

Please Bill Me via: Email US Mail

Bill me at the address listed above

Billing address is separate from above information:

Billing Address: _____

Total Annual Gift Amount \$ _____

Leadership Circle recognition is granted to those who give at least \$600 to the annual campaign.

We value your gift, and would like the opportunity to showcase your direct impact on our community. Respectfully, if you wish for your gift to remain anonymous, please let us know below.

Signature _____

Date: _____

Please **combine my recognition** with my spouse / significant other. List our names as: _____

I wish for my gift to be **anonymous**.

MY IMPACT DESIGNATIONS (optional)

Option A

United Way of Henry County & Martinsville Community Impact Fund \$ _____ -The most powerful way to invest your gift.

Option B

\$ _____ MHC Partners for Children \$ _____ Dolly Parton Imagination Library \$ _____ Financial Security \$ _____ Health \$ _____

Option C

Donor Designation
(\$25 minimum) \$ _____

Agency Code: _____

(See back for listing of agency codes)

By donating \$2.50 or more a week, or \$130 annually toward the United Way Campaign, you are eligible to receive our Community Care Card: a coupon card that provides you with year-round discounts at participating local restaurants and businesses throughout Henry County & Martinsville.

Total Gift Amount: \$ _____

Date: _____

Thank You for Supporting our Community Through Your Contribution to the United Way Campaign!

Please detached this portion for your records



United Way of
Henry County & Martinsville

Total Amount: \$ _____

Date: _____

Tax Year: _____ EIN: 54-0753318

No Goods or Services were exchanged for this gift. Please keep for your records.

The United Way Community Impact Fund

Option A - *The Most Powerful Way to Invest Your Gift*

With more than **150 volunteers** and nearly **2,500 donors** in our area each year, the **United Way of Henry County & Martinsville** is our community's *largest* privately-funded nonprofit, addressing the community's immediate and long-term needs in **youth opportunity, financial security, and health**: the building blocks for a **good quality of life**.

Community Impact Grants are how we invest your contribution into our community. Funding decisions for Community Impact Grants are made annually through a vetting process led by the Community Investment Committee. The Community Investment Committee ensures *your contribution has the greatest community impact* within our area.

If you are interested in serving on our next **Community Investment Review Panel** reach out to **Philip Wenkstern** at 276.403.5961 or by email at philip@UnitedWayofHCM.org Thank you for your interest and support!

United Way Initiatives

Option B – *Assign your gift, or a portion of your gift, to one (or all), of our local initiatives.*

MHC Partners for Children's mission is to ensure that ALL children, birth to age 5, in our area will have caring, responsible adults who have access to resources to provide for their children's social, emotional, physical and academic development so that they may enter kindergarten prepared and ready to learn.

Dolly Parton's Imagination Library puts books into the hands and hearts of children across the world. They partner with UWHCM to provide a hand-selected, age-appropriate, high-quality book each month to registered children from birth to age five.

Financial Security initiatives include UWHCM partner-programs that impact the community at an individual level. Past partnerships include VITA (Volunteer Income Assistance) free tax preparation, VIDA (Virginia Individual Development Accounts), Financial Education Programs, Financial Wellness at Work initiatives, and preparing high school seniors to maintain real-life finance through the Dollar Sense and Reality Fair.

Health initiatives focus on programming designed to encourage healthier habits and lifestyle needs.

Detailed Designation

Option C – *Assign your gift, or a portion of your gift, to any of the community agencies listed below.*

*****TO ENSURE ACCURATE DESIGNATION PLEASE LIST THE THREE-LETTER AGENCY CODE ON THE FRONT (OR PAGE 1) OF THIS FORM*****

ARC	American Red Cross	EAD	Edwards Adult Day Care	PCS	Piedmont Community Services
ANC	Anchor Commission	FCR	Fieldale-Collinsville Rescue Squad	RRS	Ridgeway Rescue Squad
AFD	Axton Volunteer Fire Department	FIA	Friends of Infinity Acres Ranch	SAM	Salvation Army
BRS	Bassett Rescue Squad	FMY	Family YMCA	SSR	Southside Survivor Response Center
BSA	Boy Scouts	FOY	FOCUS on Youth	SSS	Stepping Stones
BGC	Boys & Girls Club	GSS	Girl Scouts	STP	STEP, Inc.
CDC	Community Dream Center	GNW	Grace Network	VLA	Virginia Legal Aid Society
CHW	Connect Health + Wellness <i>Formerly Piedmont VA Dental Health Fnd.</i>	HFP	Henry County Food Pantry	OUW	Other United Way-fill in location
DRC	Disability Rights & Resource Center	HRS	Horsepasture Rescue Squad		<i>(List as Option C on front)</i>

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