



DONOR COMMITMENT FORM

LEVEL of SUPPORT

Help us fight childhood obesity, improve our community's health and increase access to physical activity, mindfulness training and nutrition education—right here at home. Help us encourage an attitude of positive change and hope for the future—right here at home. Together we can BE the change we want to see!

YES, I believe in our community's bright tomorrow—please count me in:

\$25,000—CHAIRMAN'S CIRCLE **CHAMPION***

\$10,000—CHAIRMAN'S CIRCLE*

\$5,000—PATRON

\$1,000—PLATINUM

\$500—GOLD

\$250—SILVER

OTHER \$ _____ -

Contributions at any level will support existing and future expansion of programming at the Crim Fitness Foundation.

** Payable over four years*



The Crim Fitness Foundation is a 501(c)3 non-profit organization. Your contribution is tax-deductible to the extent allowed by law.

To make your tax-deductible donation, please fill out this form and send it to:

**The Crim Fitness Foundation
452 S. Saginaw Street, Suite 1
Flint, MI 48502**

Name
Business Name (optional)
Address
City, State, Zip
Email
Phone <input type="checkbox"/> Cell <input type="checkbox"/> Home <input type="checkbox"/> Work
How would you like your name listed? <input type="checkbox"/> I would like to remain anonymous
Payment Method
<input type="checkbox"/> Check payable to Crim Fitness Foundation <input type="checkbox"/> Credit Card #
Exp CVV
<input type="checkbox"/> I would like to make a stock donation . Please contact me with the Crim's stock donation information and Tax-ID number. <input type="checkbox"/> I would like to include the Crim Fitness Foundation in my will or estate plan . Please contact me.
Payment Options
I would like to make: <input type="checkbox"/> A one-time payment <input type="checkbox"/> Annual payments over 4 years <input type="checkbox"/> Quarterly payments over 4 years <input type="checkbox"/> Other Payment Plan _____

Questions? Please contact Christina Ferris at 810.235.6232 or at cferris@crim.org.

THANK YOU!