



BAYS

Corporate Office
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www.bayskids.org
info@bayskids.org

Gift Form

Personal Information:

Name: _____

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: Home (_____) _____ Business (_____) _____

E-Mail: _____

Contribution Information:

- I authorize my donation to be publicized.
- I prefer to make my contribution anonymously.
- My contribution is being made to support _____ office/event.
- Enclosed is my gift of \$ _____
(Please make your check payable to Bay Area Youth Services, Inc.)

Tribute Information:

This gift is (Please select one)

- In honor of _____
 - In memory of _____
- (Name)

Please send notice of this remembrance to:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

We respect your privacy!

Please be assured that your personal information (including your name and email address) will not be shared with any other organizations.
KINDLY MAIL THIS COMPLETD FORM TO THE ABOVE ADDRESS.

Bay Area Youth Services Inc. is a 501(c)3 non-profit organization. Contributions are tax deductible to the fullest extent of the law. A copy of the official registration and financial information may be obtained from the Division of Consumer Services by calling toll free (800-435-7352) within the state. Registration does not imply endorsement, approval, or recommendation by the state. The BAYS Florida registration number is CH22015.