



1 My Information

Preferred Salutation: _____ Name: _____
First Last

Workplace: _____

Home Address: _____

Email: _____ Phone: _____ ☐ Work ☐ Personal

My preferred contact method is: ☐ Email ☐ Phone ☐ **I am retiring soon, lets keep in touch!** *Please provide home address or personal email.*

2 My Donation

☐ PAYROLL DEDUCTION (most popular)

I will contribute the following amount through payroll deduction:

\$ _____ per pay X _____ pay periods

TOTAL GIFT: \$ _____

In most cases, payroll deductions are reported on your T4 for tax purposes.

☐ CREDIT CARD

☐ Monthly Gift

\$ _____ per month

☐ One-time Gift

TOTAL GIFT: \$ _____

Card #: _____

Exp. Date: _____ CVV #: _____

☐ CHEQUE ☐ CASH

Please make cheques payable to United Way Niagara

☐ Automatic monthly withdrawal (void cheque)

\$ _____ per month

TOTAL GIFT: \$ _____

DID YOU KNOW? You can also make a Gift of Securities. For more information call United Way at 905-688-5050.

YOUR GIFT CAN MAKE AN EVEN BIGGER IMPACT!

I qualify for a gift matching opportunity! Details on reverse.



**HEDDLE
SHIPYARDS**
10% Challenge



MNP
New Donor Match

EXAMPLES OF
YOUR GIFT
IN ACTION



**Based on 26 pay periods*



\$5 per pay

can provide access to mental health and community supports for a vulnerable adult.*



\$10 per pay

can provide 15 teens with supports and life skills to successfully transition to adulthood.*



\$20 per pay

Friend of the Way

can provide 180 people in need with a nutritious meal.*



\$50 per pay

Leader of the Way

can provide housing and financial stability supports for 65 at-risk youth.*

3 My Recognition

Gifts of \$500 or more per year qualify for recognition in United Way's Honour Roll.

Please recognize me as: _____ ☐ Please keep my gift anonymous (I do not want public recognition)

You may combine your gift with your partner's gift for recognition purposes.

☐ Please combine my gift with my partner's gift

Partner's full name: _____ Partner's workplace (if applicable): _____

☐ Please only send me materials by email (please ensure you provide a valid email address above)

☐ I have been giving to United Way for 20 years or more (includes other communities)

☐ I have made a Legacy Gift to United Way in my Will

☐ I would like more information on Legacy Giving through my Will

☐ I would like more information on **WOMEN UNITED**

☐ I would like more information on **GENNEXT**

SIGNATURE:

SEND TO PAYROLL NOW
Save as 'your name' & attach

2023 GIFT MATCHING OPPORTUNITIES

I AM RENEWING MY SUPPORT Increases of 10% or more will be matched for greater impact!



YOUR DONATION CAN MAKE A BIGGER SPLASH!

Increase your donation to United Way Niagara by **10% or more** and The Heddle Shipyards 10% Challenge will match the increase in your gift!



If you gave \$250 last year and increase to **\$275 this year...**
+(10% increase)

+

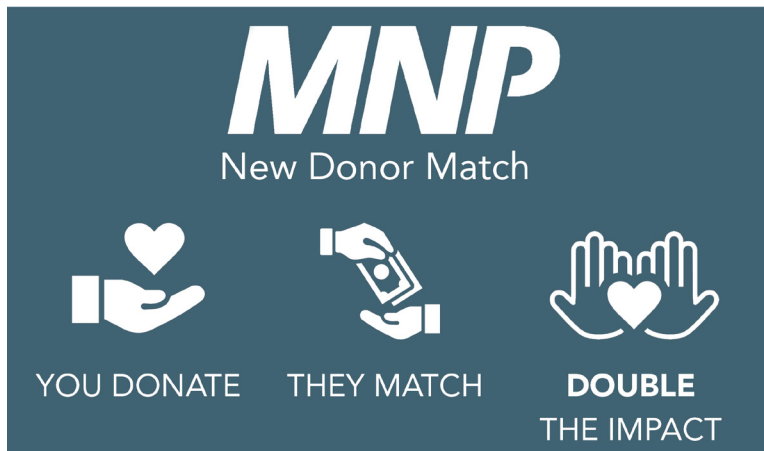
Heddle Shipyards will **MATCH** your increase and...

=

United Way will receive **\$300** to invest back into community programs!

Providing up to an additional **\$50,000** in matching funds to support United Way.

I AM A NEW DONOR Make a first time donation of any amount and it will be matched dollar-for-dollar!



Providing up to an additional **\$25,000** in matching funds to support United Way.

4 My Impact (optional)



AREA OF GREATEST NEED IN NIAGARA REGION

AREA OF GREATEST NEED IN:

- ☐ Niagara Falls & Greater Fort Erie Community \$ _____
- ☐ St. Catharines & District Community \$ _____
- ☐ South Niagara Community \$ _____



Or apply your gift to a priority area:

☐ Children & Youth \$ _____

☐ Poverty \$ _____

☐ Strong Communities \$ _____

LOCAL GIVING.
100% LOCAL IMPACT.

- ☐ I would like to direct a portion of my gift to another registered Canadian charity.
Amount: \$ _____
Charity Name: _____
Charitable Registration # (required): _____