



CAMP OLSON YMCA

One Camp, Endless Stories!

Enclosed is my tax-deductible gift in support of Camp Olson and its excellent programming and staffing.

- | | | |
|---|--|---|
| ☐ \$50/month (\$600) | ☐ \$50. (single donation) | ☐ Other monthly gift: \$_____ / month |
| ☐ \$35/month (\$420) | ☐ \$75 (single donation) | ☐ Other: \$_____ |
| ☐ \$25/month (\$300) | ☐ \$100 (single donation) | ☐ My employer will match my contribution. Form enclosed. |

Camp Olson YMCA is a 501(c)3 organization. Your donation is tax deductible to the fullest extent allowed by law.



Name _____

Address _____

City, State _____ Zip _____

Phone (cell) _____ (LL) _____

E-mail _____

I was a camper (years) _____

I was a Camp Olson staff member (years) _____

Payment Method

- ☐ Check: Make payable to Camp Olson YMCA
- ☐ Credit Card # _____

Exp. date _____ CVV Code _____

3-digit # on back of card

I hereby authorize Camp Olson to charge my account each month

beginning _____ / _____ and ending _____ / _____
month year month year

Signature _____ Date _____

On behalf of the Camp Olson Board of Directors, THANK YOU! You also can donate online at **www.campolson.org** and

Camp Olson YMCA • 4160 Little Boy Rd NE, Longville, MN 56655 Phone: 218.363.2207 • E-mail: info@campolson.org.

