Submit by Email | Print Form

Company

UNITED WAY OF ULSTER COUNTY

450 Albany Avenue, Kingston, NY 12401 - phone: 845-331-4199 - www.ulsterunitedway.org

Please Print. Thank you!

1

☐Mr. ☐Ms. ☐Mrs. ☐Dr. _____

Home Address: _____

City/State/Zip Code: _____

Preferred Phone: _____ Email: _____

2

GET-AWAY WITH UNITED WAY! ☐

☐ **For $1/week (NEW/increased donation): enter to win a 4 DAY/3 NIGHT TRIP FOR TWO TO NEW ORLEANS (FRENCH QUARTER HOTEL & AIRFARE INCLUDED)**

☐ **For $2/week (NEW/increased donation): enter to win the New Orleans get-away or AN OVERNIGHT ALL EXPENSES PAID STAY FOR TWO AT EMERSON RESORT OR MOHONK MOUNTAIN HOUSE.**

☐ **For $3/week (NEW/increased donation): enter to win the New Orleans get-away, the overnight stay at Emerson Resort or Mohonk Mountain House, or 1 WEEK IN A NAPLES, FLORIDA CONDO.**

☐ **For $5/week (NEW/increased donation): DOUBLE YOUR CHANCES TO WIN and receive 2 entries for each get-away!**

3

MY TOTAL ANNUAL PLEDGE IS: $_____

_____

Signature **(Required)** date

CONTRIBUTION METHOD:

A. ☐ Payroll Deduction B. ☐ Cash C. ☐ Check

D. ☐ Visa or Mastercard

_____

Credit Card # Exp date CSC Code

FOR PAYROLL DEPARTMENT ONLY:

_____ ÷ _____ = _____

Annual Pledge number of pay periods pledge per pay period

Even $1/week makes a big difference!

FOR: YOU CAN BUY:

$1

OR

8 MEALS from the local food pantry for a family in need

$2
OR

1 WEEK of after-school programming for a low income child

$3
OR

10 PARENTING CLASSES for parents at risk of abusing or neglecting their children

$5
OR

VOCATIONAL SERVICES to help those with disabilities succeed

Optional designation (designated gifts not eligible for "Get Away") Agency must be a not-for-profit whose primary mission is **health and human services** and an IRS approved tax deductible 501(C)(3).

_____

CONTEST RULES ON REVERSE.

ORIGINAL (White) for Employer MIDDLE (Yellow) for United Way BOTTOM (Pink) for Employee

2013