Please help us by adding your contact details:

Name: _____
Address: _____
City, State, ZIP: _____
Mobile: _____
Email: _____

☐ **Please keep me up to date on Clinton Sailing Club news & events**

Your gift may be doubled when matched by your employer; please contact your Human Resources Department for details

☐ **I am enclosing my signed matching gift form**

To leave a gift in your will, simply share this sentence with your attorney or financial planner:

"I bequeath $_____ or _____% of my estate to Clinton Sailing Club, PO Box 22, Clinton, CT 06413"

☐ **I have included Clinton Sailing Club in my will**

To learn more about planned giving, please contact Lorie Eadie, CSC President, at 860-669-2745 or president@clintonsail.org

Clinton Sailing Club
PO Box 22
Clinton, CT 06413
clintonsail.org

Yes, Lorie, I want to help local kids learn to sail!

3 easy steps to get more young people out on the water:

1) Enclosed is my annual membership of:

☐ $50 (Sailor – individual) ☐ $75 (Crew – family)
☐ $100 (Skipper – business) ☐ $250 (Captain)*
☐ $1,000 (Admiral) ☐ Other amount $_____

** $250 is the cost of a "Sailorship" (sailing scholarship) to provide a week of lessons for a child in need*

2) Payment method:

☐ Check enclosed (payable to Clinton Sailing Club)
☐ Credit card (or online at clintonsail.org/give)
Please charge in full $_____ or
Sign me up for monthly, sustaining donations of $_____

☐ **Visa** ☐ **Mastercard** ☐ **Amex** ☐ **Discover**

_ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _/_ _ _ _ _
Card number — Exp. date — 3 digit code on back of card

_____
Name as it appears on card

_____
Signature

3) I wish my gift to be: ☐ In honor of ☐ In memory of

_____
Name

Please send acknowledgement of this honor/memorial gift to:

_____
Name

_____
Email or Postal Address

How would you like your name to appear for acknowledgement of your gift?

_____
Recognition Name

☐ **I prefer to remain anonymous for recognition purposes**

Thank you! Gifts are tax deductible.