



QUARTER CLUB

SMALL BUSINESS CIRCLE
FOR SOCIAL CHANGE



United Way
Saint John, Kings
& Charlotte

**I wish to be a Quarter Club member
and commit to donate \$2,500 a year for 5 years**

Name: _____

Address: _____

Contact Person: _____ **Email:** _____
(if different from above)

Start Date: _____

Pledge Payment Information

- \$2,500 annually \$1,250 twice a year \$625 quarterly \$210 monthly
- Credit Card _____/_____/_____/_____ Expiry: ____/____
- Cheque (payable to United Way Saint John, Kings & Charlotte)
- Direct Debit (attach a void cheque)

United Way may publicly recognize me as a Quarter Club Member.

Print my name as: _____

As a member of the Quarter Club you will be helping to address two critical issues in our communities: the cycle of domestic violence and access to mental health services. How do you wish to help?

- Focus on breaking the cycle of domestic violence
- Focus on ensuring access to mental health services
- Focus on both

Authorized by:

Name Signature

United Way serving Saint John, Kings & Charlotte

506.658.1214 | alexya@unitedwaysaintjohn.com | www.unitedwaysaintjohn.com | Charitable #11927-8190 RR0001

Thank you for supporting your community!