



I/We want to contribute to *Heart of the City Kids* at *Plymouth Christian Youth Center* with the following amount:

\$25 \$50 \$100 \$250 \$500 \$1,000 \$2,500 Other \$ _____

Credit Card: Please charge \$ _____ to my credit card

Visa MasterCard American Express

Credit Card Number: _____ Expiration Date _____

Signature: _____

Name: _____

Address: _____

City, State, Zip Code: _____

Phone: (____) _____ E-mail: _____

**Please make checks payable to PCYC and mail to
Plymouth Christian Youth Center
2210 Oliver Avenue North
Minneapolis, Minnesota 55411**

Thank You!

Your Gifts are tax-deductible as allowed by law.

I/We want to be contacted about volunteering with PCYC