



The Generosity Trust
345 Frazier Avenue, Unit 205
Chattanooga, TN 37405
Tel: (423) 266-5257
Fax: (423) 265-0949

Young Givers Circle Participation Agreement

| | |
|---------------------------|---------------------------|
| _____ Name | _____ Email |
| _____ Address | _____ City, State, Zip |
| _____ Cell Phone | _____ Birthdate |
| Monthly Gift Amount:_____ | |

What: The Young Givers Circle is a collective grant making group. A contribution of \$50 gives you one vote at the Young Givers Circle grant meeting.

How to Give: There are several ways you can give to the Young Givers Circle:

1. Donor-Advised Fund – Open a donor-advised fund at The Generosity Trust and make a monthly internal transfer to the Young Givers Circle.
2. TGT set up bank draft. Please see attached a bank draft or ACH form to set up your monthly gift. Complete and return to Jennifer Sheffield:
jennifer@thegenerositytrust.org.
3. Online Giving – Click [here](#) to give by credit card. You can set up a recurring gift to the Young Givers Circle by completing the form and clicking on “Make this Gift Recurring.” There is 2.9% transaction fee to cover the credit card processing fees.
4. Check – Mail a check:
The Generosity Trust
345 Frazier Avenue, Unit 205
Chattanooga, TN 37405
Make checks payable to The Generosity Trust with Young Givers Circle in the memo line.

I hereby join the Young Giver’s Circle.

Name

Date

Return Form to Jennifer Sheffield (jennifer@thegenerositytrust.org)



ACH AUTHORIZATION AGREEMENT

I (we) hereby authorize The Generosity Trust, hereinafter referred to as TGT, to initiate entries from my (our) checking/savings account at the Financial Institution indicated below. If necessary, TGT has my (our) authorization to initiate adjustments for any transactions credited/debited in error. This authority is to remain in full force and effect until TGT is notified by me (us) in writing to cancel this agreement in such time as to afford TGT and my Financial Institution a reasonable opportunity to act on it.

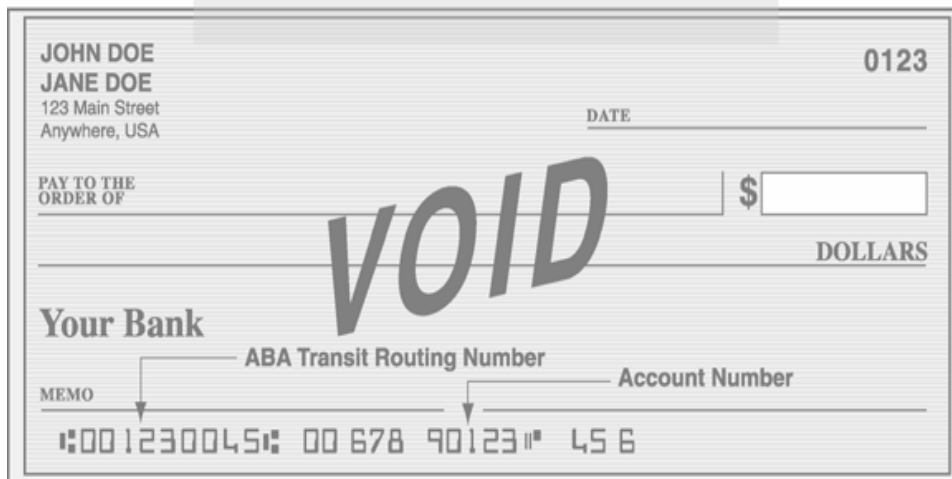
SECTION I: ACCOUNT HOLDER INFORMATION

| PRIMARY ACCOUNT OWNER | JOINT ACCOUNT OWNER (if applicable) |
|-----------------------|-------------------------------------|
| NAME | NAME |
| SIGNATURE | SIGNATURE |
| DATE | DATE |

SECTION II: FINANCIAL INSTITUTION INFORMATION

| | | | |
|------------------|----------------|----|-----|
| NAME | CITY | ST | ZIP |
| ROUTING NUMBER * | ACCOUNT NUMBER | | |

Please adhere, with tape, a voided check from which your distributions will be made from



* Please note, some financial institutions, such as SunTrust, may have a different ACH routing number from the bank routing number. Please check with your Financial Institution if you are unsure of the applicable number *

SECTION III: DISTRIBUTION INFORMATION

| | |
|--|--|
| Your Fund Name: Young Givers Circle | Amount to withdraw: |
| Frequency: <input type="checkbox"/> Semi-Monthly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Annually | Date to withdraw: <input type="checkbox"/> 5 th <input type="checkbox"/> 21 st |
| Additional donor notes: | |

Please submit this form to Jennifer Sheffield via mail or email:

| | |
|---|---------------------------------|
| The Generosity Trust Attn: Jennifer Sheffield 345 Frazier Avenue, Unit 205 Chattanooga, TN 37405 | jennifer@thegenerositytrust.org |
|---|---------------------------------|

If you have any questions, please call (423) 266-5257