



Bodhi Youth of America

HARMONY PINES CAMP & RETREAT CENTER - Wrightwood, CA
(931) BYA-CAMP or <http://camp.bodhiyouth.org>

Monthly Donation Form

Yes! I'd like to make a monthly contribution to BYA.

Sponsor Information:

Name: _____
Address: _____
Phone: _____
Email: _____

For BYA Use Only:
Received by _____
Date: _____
Amount: \$ _____
Via: ___ Check / ___ CC

I authorize a monthly automatic payment in the amount of:

- \$10 \$15 \$20 \$25 \$30 \$40 \$50 or Other \$_____

Please withdraw directly from my debit card or my credit card on the 1st business day of each month:

___ Debit Card or ___ Credit Card	Card Type: <input type="checkbox"/> Master <input type="checkbox"/> Visa <input type="checkbox"/> Discover <input type="checkbox"/> American Express	
Card Number	Card Exp (MM/YYYY)	CVV Number
Billing Address if different from above	Name as it appears on card (please print)	

I authorize BYA to process the monthly automatic payment above from my debit or credit card. This authority will remain in effect until I give a written notice to BYA and/or the financial institution to terminate this authorization.

Signature

Date

I will set up monthly check to be sent automatically from my bank to BYA via Pay-bills.
(Payee: BYA – Reference Acct No: 12-12-12. Address: [P.O. Box 2218, Fontana, CA 92334](mailto:angela.vu@bodhiyouth.org))

**BYA is a 501(c)(3) organization and your total year contribution is tax deductible to the full extent of the law.
Questions and correspondence should be directed to Angela Vu at: angela.vu@bodhiyouth.org**

Please mail this form to our office at [P.O. Box 2218, Fontana, CA 92334](mailto:angela.vu@bodhiyouth.org) or Fax to: **909-753-0359**

Thank you for your generous support!