



# ASSOCIATED YOUTH SERVICES DONATION FORM

Contact:  
Teri Kriege: 913 831 2820 X231

Date: \_\_\_\_\_

I have enclosed a check to make a tax deductible gift to **Associated Youth Services** at the following level:

\$500+

Other

\$250

\$100

\$50

Name

Business Name

Mailing Address

Phone

Email

Select all that apply:

I am interested in receiving AYS' quarterly eNewsletters.

I would like to find out more about becoming a foster parent.

I would like more information about how I can become involved with AYS.

I am interested in giving to AYS, but would like to discuss some other form of planned giving. Please contact me.

## Associated Youth Services

*Giving Youth Roots to Grow and Wings to Fly since 1972*

**Street Address:**  
803 Armstrong Avenue  
Kansas City, KS 66101

**Mailing Address:**  
P.O. Box 171234  
Kansas City, KS 66117

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