

Planned Giving to Youth Encounter By Mail

Thank you for supporting this ministry. Please fill out this form with current and accurate information and send it to the address provided.

Your Information:	
	Full Name:
	Spouse Name:
	Street Address:
	City, State, Zip:
	Country:
	Phone Number:
	Email Address:
Your Planned Giving	g:
I lift up my prayers and gifts to God by donating to Youth Encounter through my:	
☐ Bequest in Will or Living Trust	
□ Reti	rement Plan
□ Chai	ritable Remainder Trust or Unitrust
□ Life	Insurance Policy
□ Stoc	k Shares