

Muslim Youth Leadership Award

P. O. BOX 32628 • Fridley - Minnesota • 55432

Name: _____

Address: _____

Telephone: _____ Email: _____

I would like to support the Muslim Youth Leadership Award (MYLA) in accomplishing their vision and goals.

Please accept my: MYLA _____ Scholarship:

One-time donation of:

\$25 \$50 \$100 \$200 \$500 \$1000 \$2500 Other \$ _____

Monthly donation Pledge

I grant permission to the MYLA and Vanco Services, LLC to withdraw the amount of \$ _____ every month or for _____ months directly from my bank account or credit card. This authorization will remain in effect until I give reasonable notification to terminate. I have attached a voided check (if using bank account) to ensure accuracy.

Payment Method

Check Routing Number _____ Account Number: _____

OR Credit Card Number _____ Expiration Date (MM/YY): _____

Signature _____ Date: _____

Please check this box, if you would not like your named scholarship to be combined with another named scholarship

MYLA is a nonprofit organization under Section 501(c)(3) of the IRS. All donations are tax deductible to the full extent permitted by law