



Countryside YMCA

1699 Deerfield Rd, Lebanon, OH 45036

Non-Profit Verification Form

This form is to verify the non-profit status of your organization for eligibility for discounted rates or other benefits at the Countryside YMCA.

Organization Information

Organization Name: _____

Primary Contact Name: _____

Phone Number: _____

Email Address: _____

Mailing Address: _____

Verification of Non-Profit Status

Please provide **one** of the following:

IRS 501(c)(3) Determination Letter (attach a copy)

EIN (Employer Identification Number): _____

By signing below, you certify that the information provided above is accurate and true to the best of your knowledge.

Authorized Signature: _____

Date: _____



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