2020 Annual Support Campaign
Campaign Volunteer

DESCRIPTION OF RESPONSIBILITIES

PURPOSE
To be a storyteller and convey the positive impact of programs and services in the community on behalf of the YMCA. To act as a YMCA ambassador. To share giving opportunities, including your very own fundraising webpage. To make visits and/or calls with YMCA members and friends for the purpose of raising contributed funds that will result in the attainment of your individual and team goal.

RESPONSIBILITIES
1. Support the Annual Campaign at the Sacramento Central YMCA with a meaningful personal gift.
2. Make the time commitment - about 10-12 hours’ total including trainings, kick-off event, report meetings, and celebration events during the 6-week volunteer commitment.
3. Attend one training session to become informed about the YMCA story and best practices.
4. Create a prospect list and invite people to support our cause.
5. Contact assigned donor prospects to share the Y story and ask for a meaningful gift.
6. Return all pledge forms with results noted weekly so the Y can thank our generous donors and supporters!
7. Attend Kick-off and Celebration Events. Call in or attend Volunteer Check-In meetings.

END RESULTS
• Successfully reach our campaign goal - $95,000 for the Sacramento Central YMCA Branch.
• Satisfaction that you have made a difference in the lives of the children and families in our community.
• A desire to volunteer for future campaigns.

KEY VOLUNTEER CAMPAIGN DATES
• Campaigner Trainings (choose one)
  • February 12 at 12:00pm, February 13 at 6:00pm, February 14 at 7:30am
• Community Campaign Kick-off Event
  • February 19th at 6:00pm-8:00pm
• Volunteer Check-in meetings (phone call or in-person options)
  • February 26th 12:00pm-1:00pm
  • March 4th 12:00pm-1:00pm
  • March 11th 12:00pm-1:00pm
  • March 18th 12:00pm-1:00pm
• Community Campaign Celebration Event
  • March 27th at 5:00pm- 7:00pm

Printed Name: ____________________________________ Date:____________
Actively checked e-mail address: _______________________________________
Phone: ________________________
Signature: _____________________________________________________________

Please turn in completed form to Member Services Desk.