YOUTH GYMNASTICS CLUB

[Club Address Line 1]
[City, State, Zip Code]
[Phone Number] | [Email Address]

Invoice #: _____
Date: _____

Donor Information:

Name: _____
Address: _____
City/State: _____
Email: _____

Donation Details:

Tax ID: [Federal Tax ID Number]
Purpose: [e.g., Equipment Fund / Scholarship]

Description	Quantity	Amount
Gymnastics Equipment Contribution	____	$ _____
Sponsorship Program (Level: _____)	____	$ _____
General Youth Athletic Grant	____	$ _____
Other: _____	____	$ _____

Total Donation Amount: $ _____

Thank you for supporting our young athletes!

The Youth Gymnastics Club is a [501(c)(3)] non-profit organization. No goods or services were provided in exchange for this contribution. Please retain this receipt for your tax records.