

# **SCN YOUTH WRESTLING CLUB**

**St. Charles, IL.**

**Member of IKWF (Illinois Kids Wrestling Federation)  
Non-for-Profit Organization  
Public Charity Status 509 (a) (2)**

Running a successful youth wrestling program requires a lot of time, effort, and financial resources. Unfortunately, wrestling does not have the mainstream appeal as do other sports. Wrestling is rarely understood for its value in building character, work ethic and instilling a sense of responsibility and pride in one's ability to achieve goals they have set for themselves. Given this challenge, we are extremely grateful for any gifts or contributions we may receive from corporations, local businesses, and individual contributors. Please note that your contribution is deductible under IRC section 170. A copy of our exemption letter is on file. Without your support we could not offer a quality program for our youth wrestling students.

**Please Note:**

- 1. SCN Youth Wrestling is a public charity which accepts contributions from donors**
- 2. SCN Youth Wrestling supports over 100 students actively involved in the program**
- 3. Contribution is tax deductible under IRC section 170**
- 4. It is for the benefit of the children**
- 5. To find out more about SCN Youth Wrestling visit us at [www.scnyouthwrestling.com](http://www.scnyouthwrestling.com)**

We kindly ask you to complete the attached form and return with your check. We will confirm your payment and contact you for additional information. If you have any further questions, contact Scott Jaffe via email at [sdj2668@msn.com](mailto:sdj2668@msn.com) or by phone at 708-502-1231.

# ST CHARLES YOUTH WRESTLING CLUB CONTRIBUTION FORM

**Company Name:** \_\_\_\_\_

**Company Website:** \_\_\_\_\_

**Contact:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Business Phone:** \_\_\_\_\_

**Business Fax:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Business Description:** \_\_\_\_\_

\_\_\_\_\_

**Industry:** \_\_\_\_\_

Select your level of contribution:

( ) Level 3 \$2500.00

( ) Level 2 \$5000.00

( ) Level 1 \$10000.00 or other \$ \_\_\_\_\_

**Check #** \_\_\_\_\_ **Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Payable to: SCN Youth Wrestling Club**

St Charles Youth Wrestling Club is a member of IKWF and is a public charity, registered in the USA

**Mail To:**  
SCN Youth Wrestling  
Scott Jaffe  
3465 Dover Hill Ct.  
St Charles, IL. 60175

**Make checks payable to:**  
SCN Youth Wrestling Club