

YMCA OF THE NORTHWOODS Share your "Y" - Story or Testimonial

Name:	Email:	_
Phone:	Preferred Contact: Phone	Email
Any YMCA Team Member(s) be	en a part of your journey:	
How long have you been a mer	mber of the YMCA:	
Which YMCA program/etc has	impacted you the most:	
Tell us about Your Y Story:		
How has the YMCA made an im	npact on you or your family:	
What do you feel is interesting	g or unique about your experience:	
What does the YMCA mean to	you:	