



2026 Give Local Matches and Challenges Form

This form should be completed and submitted by *nonprofits* registered with Give Local 2026.

As part of your giving day strategy, nonprofits are encouraged to work with donors in advance of Give Local to set up [matches and challenges](#). These special gifts are used to inspire additional donors to participate in the online campaign on April 21-22.

The Foundation will allow matches/challenges within the following parameters:

- Organizations may have a maximum of 3 matches/challenges during the annual Give Local campaign and each match/challenge must have a minimum dollar value of \$500.
- Match/challenge donors may make their contribution directly to your organization, via offline gift in accordance with the offline gifts policy (gifts of \$5K or more), or via their Connecticut Community Foundation donor advised fund. **Match/challenge gifts cannot be completed via credit card during the live Give Local event.**
- For the purpose of bonus funds and prizes, a match/challenge donor counts as one donor.
- If the match/challenge is not met during the live event, the Foundation may still add the match/challenge donation to the organization's Give Local totals with donor authorization.

Instructions:

1. Check out details regarding matches and challenges in the [nonprofit toolkit](#).
2. Please complete one form for each match/challenge you plan to set up.
3. Attach proof (via letter or email from your donor) to substantiate your matching funds.
4. Add the match or challenge to your GiveGab profile by April 14. Instructions are [available here](#).

Organization Name _____

Organization Contact _____

Match/Challenge Title _____

Match/Challenge Conditions (Confirm with Donor)

Yes, the donor agrees to donate the full match/challenge amount even if the gift goal is not met

No, the donor will only release the match/challenge if the gift goal is met

Gift Information Total Amount _____

Type Check(s) payable to your organization

Offline Gift (\$5K minimum, check payable to CCF and due 4/14/2026)

CCF Donor Advised Fund transfer (donor to submit a request by 4/14/2026)

Donor Information (Please complete page 2 if multiple donors are contributing funds to this particular match/challenge):

Name _____

Donor(s) listed anonymously

Address _____

Email Address _____

Please return by **4/14/2026** to: Connecticut Community Foundation, Email: givelocal@connct.org.
Contact Sarah Edelson at 475-313-0009 with any questions.

Additional Donor Information for pooled matches/challenges:

	Donor Name	Donor Address	Donor Email Address
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			