



Lincoln Children's Museum Donation Form

Quick, before they grow up.

ENCLOSED IS MY GIFT OF: \$25 \$50 \$100 Other \$ _____

ENCLOSED IS A CHECK *(Please make checks payable to Lincoln Children's Museum)*

PLEASE BILL MY CREDIT CARD (VISA / MC / DISCOVER / AMEX)

CARD NUMBER _____ EXPIRATION DATE _____

NAME AS IT APPEARS ON CARD _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ E-MAIL _____

SIGNATURE _____

MY GIFT IS IN HONOR/MEMORY OF:

PLEASE SEND AN ACKNOWLEDGEMENT OF MY GIFT TO:

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____
