



# Kenosha Public Museums Donation Form

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I would like to make a Donation to the Kenosha Public Museums.

## 1. Contact Information

Your Name \_\_\_\_\_

Business or Organization \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Your phone number and email address will only be used by the Kenosha Public Museums to contact you about your Gift Donation. This information will NOT be shared with any other organization.

## 2. Donation Information

I wish to purchase the following (please check one):

Boulder  Etched Glass Amount \$ \_\_\_\_\_

If you are making this donation on behalf of another individual or organization, to whom shall we send the Gift Certificate acknowledging your donation?

Me  Gift Recipient

Gift Recipient's Name \_\_\_\_\_

Business or Organization \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name as it should appear on the boulder or etched glass:

\_\_\_\_\_

Special Message (optional) \_\_\_\_\_

## 3. Payment Information (Please make checks payable to Kenosha Public Museums)

Credit card type (please check one)  Visa  MasterCard

Card # \_\_\_\_\_

Exp. date: \_\_\_\_\_

Name on card: \_\_\_\_\_

Signature: \_\_\_\_\_

I have enclosed my personal check made payable to Kenosha Public Museums.

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**Mail to:**  
Kenosha Public Museums  
Attn: Development Office  
5500 First Avenue  
Kenosha, WI 53140

**Fax To:**  
Kenosha Public Museums  
(262) 653-4437  
Attn: Development Office