

## **Donation Form**

## YOUR CONTACT INFORMATION

FIRST NAME:	LAST NAME:		
ADDRESS:			
CITY:	STATE:		ZIP:
EMAIL ADDRESS:	PHONE:		
Yes, please add me to your mailing list.			
DONATION INFORMATION			
I have enclosed a check for \$ (payable to	Bailey-Matthews Nationa	I Shell Museun	n & Aquarium)
Please charge \$ to my: OVisa OMasterCard ODiscover OAmerican Express			
CARD NUMBER:		EXP. DATE:	CVV:
NAME ON CARD:	SIGNATURE:		
I would like my donation to support:			
Greatest Need	PLANNED GIVING		
Education Collection	For information, please call 239-395-2233.		
My gift is:			
My gift is:			

## PLEASE RETURN FORM TO

Bailey-Matthews National Shell Museum & Aquarium PO Box 1580 Sanibel, FL 33957, USA 100% of your tax-deductible contribution is used to support the Museum's mission to connect people to the natural world through their love of shells and the marvelous animals that create them.

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