

DONOR/PLEDGE FORM



I am/we are committing to the following tax-deductible donation/pledge to the Niagara-on-the-Lake Museum expansion project:

\$ _____

PAYMENT INSTRUCTIONS

I am fulfilling the entire pledge at this time.

I will pay the entire pledge on or before

I would like to pledge \$ _____ per year over 5 years.

I would like to be billed in ____ installments

of \$ _____

Monthly Annually

Beginning _____

Please charge my credit card: Cheque enclosed

#: _____

Expiry: ____ / ____ CVV: _____

I would like to give a gift of stocks or securities.

RECOGNITION

I/We would like to be recognized as:

Please keep my donation confidential

CONTACT INFORMATION

Donor Name(s):

Address:

Phone:

Email:

*By providing your email, you agree to receive electronic messages from the Niagara-on-the-Lake Museum.

CONFIRMATION

Signature: _____

Date: _____



Niagara-on-the-Lake Museum is owned and operated
by the Niagara Historical Society.
Niagara Historical Society Charitable #119057370 RR0001
For more information, please contact 905-468-3912