



National Potluck Donation Form

I would like to contribute to the National Museum of the American Indian's 2010 National Potluck

1. Please check one:

Yes, I am a Member. My member number is _____

No, I am not a member.

Please credit my gift to the following Potluck/Potluck Host:

2. Contact Information:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Your phone number and email address will only be used by Member Services to contact you about your donation. This information will NOT be shared with any other organizations.

3. Donation Information:

I wish to donate the following amount (please check one):

\$50 \$20 \$15 \$10 \$5 Other: \$ _____

4. Payment Information: (Please make checks payable to NMAI)

Credit card type (Please check one) Visa MasterCard American Express Discover

Card #: _____ Exp.date: _____

Name on card: _____

Signature: _____

I have enclosed my personal check made payable to NMAI (U.S. funds only).

I have enclosed a matching gift form from my Employer.

Mail to:
NMAI
National Potluck
PO Box 23473
Washington, DC 20026-3473

Fax to:
NMAI
202-633-6920
Attn: National Potluck

Source Code
HPOTLUCK10