



The Sitka History Museum

210 Seward Street Sitka, Alaska 99835
Phone: 907 747 6455 Fax: 907 747 6588

Donation Form

Contact Information

Name _____

Business Name (Corporate Donation Only)

Mailing Address

City _____ State _____ Zip _____

Email _____

Phone _____

Gift Type (Please check one)

- Donation Endowment
 Capital Campaign Donation

General Donation & Endowment Specifications:

- Please keep my donation anonymous
 This is a Memorial or Tribute gift

In Memory of: _____

In Honor of: _____

Please include the name and mailing address of the individual or family you wish to notify of your gift. If you have elected to remain anonymous, we will withhold your information from the notification.

Name

City _____ State _____ Zip _____

Capital Campaign Donation Specifications:

Donor Level (Please check one)

- \$500 and above \$1,000 and above
 \$5,000 and above \$10,000 and above
 \$75,000 and above \$150,000 and above

How would you like your donor recognition plaque to read? (Capital Campaign only, limit 50 characters, including spaces)?

Payment Type (Please check one)

- Credit Card Check Money Order

Donation Amount _____

**Enclose money order or check payable to the Sitka Historical Society or Charge to credit card:
(Specify card type below)**

Card Type _____ Exp. Date _____

Card # _____

CVV (3 or 4 digit security code) _____

Name on Card _____

Signature _____

Billing Address (if different than Mailing)

City _____ State _____ Zip _____

Mail to:
Sitka Historical Society
210 Seward Street
Sitka, AK 99835