



# Lakeshore Museum Center

## Donation Form

Your investment in the Lakeshore Museum Center allows us to fulfill our mission and tell the special stories that make Muskegonites and tourists alike proud of our history.

I/we would like to contribute a gift to the Lakeshore Museum Center in the amount of:

- \$2000    \$1000    \$500    \$250    \$100    \$50  
 Other \$ \_\_\_\_\_

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

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

- My check is enclosed. Please make your check payable to Lakeshore Museum Center  
 Charge my credit card:  Visa  Mastercard Expiration Date: \_\_\_\_/\_\_\_\_ Code: \_\_\_\_

Account # \_\_\_\_-\_\_\_\_-\_\_\_\_/\_\_\_\_-\_\_\_\_-\_\_\_\_/\_\_\_\_-\_\_\_\_-\_\_\_\_/\_\_\_\_-\_\_\_\_-\_\_\_\_

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

Please print and complete this form and return to:

Lakeshore Museum Center

430 W. Clay Ave.

Muskegon MI 49440

Thank you from the Lakeshore Museum Center Board of Trustees and Staff.