

Museum of Coastal Carolina
Donor Sponsorship Pledge Form

Donor Information

Name: _____

Billing Address: _____

Telephone: Home _____ Business _____

Fax: _____ Email: _____

Sponsorship Levels

Whale Sponsor -- \$5,000 Shark Sponsor -- \$2,500 Dolphin Sponsor -- \$1,000

Pledge Information

I (we) pledge a total of \$_____ to be paid:

Now Monthly Quarterly Yearly

I (we) plan to make this contribution in the form of:

Cash Check Credit Card Other

Gift will be matched by _____ (company/family/foundation).

Form is enclosed Form will be forwarded

I wish to be contacted to be a major exhibit sponsor.

Acknowledgement Information

Please use the following name(s) in all acknowledgements:

I (we) wish to have the gift remain anonymous.

Signature: _____ Date: _____

Please make checks, corporate matches, or other gifts payable to: Ocean Isle Museum Foundation, Inc., 21 E. 2 nd Street, Ocean Isle Beach, NC 28469
