



## Contribution Form

Thank you for your generous contribution to Madison Children's Museum. Your gift will ensure that we continue to provide the one-of-a-kind experiences that allow Madison's children to explore, create, discover and learn.

Thank you!

Name \_\_\_\_\_

Street address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

### Donation Amount

I would like to support the museum with a gift of \$ \_\_\_\_\_

I would like to pay

- In full
- Annually
- Semi-Annually
- Quarterly
- Monthly

### Payment Options

I will make my contribution in the form of

- Check (please make payable to Madison Children's Museum Foundation)
- Stock Transfer (please contact the Director of Development at 608.354.0534)
- Credit Card
  - Visa
  - MasterCard
  - Discover
  - American Express

Cardholder's name \_\_\_\_\_

Card number \_\_\_\_\_ Expiration date \_\_\_\_\_ Security code \_\_\_\_\_

### Donor Recognition

- For recognition purposes, please list my name as:

\_\_\_\_\_

- I wish to remain anonymous.

**Thank you once again for your generous support.**

Madison Children's Museum is a not-for-profit, 501(c)3 organization.  
Your gift is tax-deductible to the fullest extent provided by law.

Contact us at 608.354.0537 or  
give@madisonchildrensmuseum.org with any questions.

**Give online now at [MadisonChildrensMuseum.org](http://MadisonChildrensMuseum.org) or please mail, email or fax this form to:  
Madison Children's Museum | 100 N. Hamilton St. | Madison, WI 53703 | Fax: 608.268.1398**