

Annual Fund Donation Form

Thank you for your interest in donating to the USS Constitution Museum. Please complete the following form.

Name: _____

Mailing Address: _____

City, State Zip: _____

Email: _____

Phone Number: _____

Yes! I wish to support the mission of the USS Constitution Museum by making a \$ _____ donation to the annual fund:

My employer (_____) will match my donation to the Museum.

I have enclosed my employer's matching gift form with my donation.

I will send my employer's matching gift form later

I have enclosed a check made out to the USS Constitution Museum OR

Please charge the full amount of my donation to the following credit card:

Master Card Visa American Express Discover

Account #: _____ Exp. Date: _____

Name on Card: _____

Signature: _____

I would like to learn more about the Museum's

Educational Programming and curriculum unit ("All Hands on Deck!")

Research on USS CONSTITUTION's crewmembers

New family-friendly exhibit and/or research on family learning in museums

Ways I can become more involved in the Museum

National outreach program ("Old Ironsides" Across the Nation)

I would like to receive email newsletters with information and updates on the Museum's programming and on USS CONSTITUTION.

To pay with check or money order, please print this form and send with payment to USS Constitution Museum, P.O. Box 291812, Boston, MA 02129-0215. Please provide full contact and donation information.