

I/We want to make a contribution to help Vesterheim.

Name							
Street							
City & State					Zip		
Phone ()						
I am paying for my	contribution	ı by:					
☐ Check	☐ Mas	terCard	□ VISA		☐ Discover	☐ American Express	
Account Number							
Experation Date				Veri	fication Code:		
Signature							
Enclosed is a contril		□ 500	□ 300	1 00	□ other		
Don't forget about r	natching gift	rs!					
This contribution is	made □ ir	n memory of, or	r 🔲 in honor of	:			
□ Send me Vesterhe Email address				•			
Please send me more	e informatio	n about:					
☐ Gift Membership	S						
☐ Valhalla Society (planned givi	ng)					
☐ Compass Club (n	nonthly auto	matic donation	as)				
Send the form, alon Development Depar Vesterheim Museum	rtment	check or credit	card information	ı to:			

P.O. Box 379, Decorah, IA 52101