

Date: \_\_\_\_\_

**Yes, I would like to make a donation to the Lynden Sculpture Garden!**

I would like to contribute:

\_\_\_ \$25     \_\_\_ \$50     \_\_\_ \$100     \_\_\_ \$250     \_\_\_ \$1000

\_\_\_ Other amount \$ \_\_\_\_\_

**CONTACT INFORMATION**

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

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

City/State/Zip: \_\_\_\_\_

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

Phone: \_\_\_\_\_

**PAYMENT INFORMATION**

Total Contribution                    \$ \_\_\_\_\_

Cash             Check (*made payable to Bradley Family Foundation*)

MasterCard     Visa     Discover     American Express

\_\_\_\_\_

|                    |            |     |
|--------------------|------------|-----|
| Credit Card Number | Expiration | CVV |
|--------------------|------------|-----|

Signature \_\_\_\_\_

Thank you for your donation to the Lynden Sculpture Garden. The full amount of your gift is tax deductible within the limits of the law. No goods or services are provided in return for this gift.

**BY MAIL**      LYNDEN SCULPTURE GARDEN, 2145 W. Brown Deer Rd, Milwaukee, WI 53217

**BY PHONE**    414-446-8794

**BY FAX**      414-446-8492

**ON SITE**     at the Entrance Desk

**ONLINE**     [lydensculpturegarden.org/donate](http://lydensculpturegarden.org/donate)

\_\_\_\_\_

*For office use only:* Entered \_\_\_\_\_    Receipt Sent \_\_\_\_\_    Payment Processed \_\_\_\_\_