

DONATION FORM



How can we help you today?

- Please accept my donation for the children!
- Please contact me about a donation.
- I would like to become a member.
- I would like to attend a Special Event.
- My employer has a matching gift program.

Name _____

Address _____

City _____ State _____ Zipcode _____

Email Address _____

Payment Information:

- Mastercard Visa Check Cash

Date of Purchase _____

Card # _____

Expiration Date _____

Name on the Card _____

Signature _____

Donation Options

- Donate Online
- Donate by printing this form and mailing to CDMOD
- Attend a special event
- Become a shareholder
- Create a special tribute

Please mail to:

Children's Museum Of The Desert, Attention: Carey Morales, 71-701 Gerald Ford Drive, Rancho Mirage, CA 92270

