



Donation Form

Contact Information

Name: Mr. Ms. Mrs. _____
(circle one)

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

Gift Information

I would like to support the National Marine Sanctuary Foundation with a gift of \$ _____

Donor Signature: _____ Date: _____

I (we) would like to be acknowledged for this gift as:

Additional Comments: _____
(including donation designation if appropriate)

Please make your check payable to the **National Marine Sanctuary Foundation** and return this form to:

National Marine Sanctuary Foundation
Attn: Development
8455 Colesville Road, Suite 1275
Silver Spring, MD 20910

You may be eligible to increase the impact of your gift with employer matching funds. Check with your employer for more information.

I would like more information about including the National Marine Sanctuary Foundation in my estate plans.

For more information, please contact development@marinesanctuary.org or call 301.608.3040.
Thank you for your support!

*The National Marine Sanctuary Foundation is recognized by the IRS
as a 501(c)3 public charity, Federal Tax ID 94-3370994.*

MARINESANCTUARY.ORG | 8455 COLESVILLE ROAD, SUITE 1275, SILVER SPRING, MD 20910