Contribution Form



| Name(s): | | | | | |
|--|--|--|---|----------------|--|
| Organization/Busines | s (if applicable): | | | | |
| Mailing Address: | | | | | |
| City: Sta | | <u>State</u> | : | Zip: | |
| Telephone: | Email: | | | | |
| (Include your email to receive our e-newsletter.) | | | | | |
| | Contribution amount (tax deductible): | | | | |
| | \$25 \$35 \$50 \$100 \$250 | □ \$500 □ \$1,000 □ \$2,500 □ \$5,000 □ \$(other | | | |
| OPTIONAL - my gift is: | | | Seasonal address (not for mailing purposes): | | |
| To remain anonymous in the Annual Report | | | | | |
| □ In memory of: | | | | | |
| □ In honor of: | | | | | |
| Notify the following person of my memorial/honorary gift <i>(include name/address):</i> | | | Please send me information on: | | |
| | | | Protecting my land | | |
| | | | Becoming a volunteer Including NWLT in my will / estate plan | | |
| | | | | v _ i iii iiiy | |



Make checks payable & remit form to:

Northwoods Land Trust, PO Box 321, Eagle River, WI 54521

Thank you for your support!

To donate by credit card, visit www.northwoodslandtrust.org