

The MacDowell Colony

GIFT FORM

To help give artists the gift of time and an inspiring place to work, I enclose a contribution of \$ _____ for The MacDowell Colony.

Name: _____
Please print your name as you wish to be listed.

I prefer to make my gift anonymously.

Address _____

City _____ State _____ Zip Code _____

Telephone _____ Fax _____

E-mail _____

Please check the type of gift:

- General Contribution \$ _____
- Colony Fellow Fund \$ _____
- Annual Appeal \$ _____
- National Council \$ _____
- Delta Omicron Studio Renovation Project \$ _____
- Other: _____ \$ _____

Additional Comments:

I (We) enclose a check for: \$ _____
*Please make checks payable to **The MacDowell Colony**.*

Please bill my credit card:
 VISA MasterCard American Express # _____ \$ _____

Name _____ Exp. date (____/____) Security Code _____
(as it appears on card)

Signature _____

My company will match my gift in the amount of \$ _____ *(please include Matching Gift form)*

To charge your gift by phone or for more information, please call (212) 535-9690.

Please either complete this form online and print it out, or print it and fill it in ink. The form requires your signature for credit card payments. Fax this form to us at **(212) 737-3803** (credit card only), or mail it with your check or credit card information to: **The MacDowell Colony, 163 East 81st Street, New York, NY 10028.**

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