

THANK YOU FOR YOUR DONATION

PLEASE INDICATE THE AMOUNT YOU WILL BE DONATING \$	
I WOULD LIKE TO MAKE MY DONATION	
IN MEMORY OF	
IN HONOR OF	
WE WILL BE HAPPY TO ACKNOWLEDGE YOUR DONATION WITH A CARD	
NAME	
ADDRESS	
CITY/TOWN	
STATE ZIP CODE	
PLEASE FILLOUT THE INFORMATION REQUESTED BELOW SO WE CAN RESPOND TO YOUR REQU	JEST
NAME	
ADDRESS	
CITY	
STATE ZIP CODE	
PHONE	
OR EMAIL	

PRINT THE COMPLETED FORM, INCLUDE YOUR CHECK, AND MAIL TO:

PILGRIM MONUMENT ATTN: DIRECTOR P.O. BOX 1125 PROVINCETOWN,MA 02657