

# PLEDGE OF INTENT TO SUPPORT

## the National Mississippi River Museum & Aquarium



Donor Name(s) or Organization's  
Contact Name: \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ ZIP: \_\_\_\_\_

I/We pledge a TOTAL of \$ \_\_\_\_\_ to the National Mississippi River Museum & Aquarium capital campaign.

Enclosed please find \$ \_\_\_\_\_.

The remainder of this commitment will be fulfilled with payments of \$ \_\_\_\_\_, which will be contributed:  annually  semi-annually  quarterly  monthly for:  1 year  2 years  3 years  4 years  5 years

in the month(s) of: \_\_\_\_\_.

I/We plan to make this contribution in the form of:

cash  check  credit card  other

Credit card type: \_\_\_\_\_ Exp. date: \_\_\_\_\_ Credit card #: \_\_\_\_\_

CVV/CSV#: \_\_\_\_\_ Authorized signature: \_\_\_\_\_

I would like to receive my reminder and contribution letter by  mail or  email.

My/My spouse's company will match my/our gift: \_\_\_\_\_

*Company Name(s)*

Form Enclosed  Form will be forwarded

Please contact me about a stock or other form of gift, including inclusion of National River Museum & Aquarium in my estate plan.

Individual name(s) or organization name to be listed for gift recognition, as I want them to appear: \_\_\_\_\_

My gift is  in honor of  in memory of \_\_\_\_\_

I/We would like our gift to be recognized through a naming opportunity of:

\_\_\_\_\_

I/We would like our gift to remain anonymous.

Signature(s) \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ Date: \_\_\_\_\_

**Make gift(s) payable to:** National Mississippi River  
Museum & Aquarium  
350 E. Third Street  
Dubuque, IA 52001  
**RIVERMUSEUM.ORG**

*Contributions to NMRMA, a 501(c)(3)  
nonprofit organization, are tax-deductible  
to the greatest extent of the law.  
Thank you for supporting NMRMA.*