

Museum Donation Form

Please provide us with the following information, for receipt purposes:

Name: _____
Street Address: _____
City/Town: _____
Province/State: _____
Country: _____
Postal Code/Zip Code: _____
Telephone: _____
Email Address: _____
I am enclosing a cheque for this amount \$ _____

Please make your cheque payable to the Goulbourn Museum and send to:

The Goulbourn Museum
2064 Huntley Road
Stittsville, Ontario
CANADA
K2S 1B8