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Founding 50 Pledge Form

I/we contribute a pledge of \$ _____ to the Grand Haven
Children's Museum as part of its *Founding 50* Campaign.

Name (as you would like recognized):

Address:

Phone:

Email:

Signature:

_____ Date: _____

Please mail donations to:

Grand Haven Children's Museum
PO Box 572
Grand Haven, MI 49417

*We are also able to accept donations via ACH. Please email for details.

The Grand Haven Children's Museum is a 501(c)(3) non-profit organization.