

Mid-Atlantic Center for the Arts & Humanities (MAC)
ANNUAL APPEAL CONTRIBUTION FORM

*Yes, I would like to help ensure the future stability
of the Mid-Atlantic Center for the Arts & Humanities
by contributing to:*

- The Cape May Legacy Fund MAC's On-going Programming

at the following level (please check one):

\$10,000 \$5,000 \$1,000 \$500 \$250 \$100 \$50 \$25 Other \$ _____

- Please send me information on naming MAC in my will and other planned giving opportunities.
 Check here and enclose your matching gift amount.
 Enclosed please find a check for the full amount

*Please make check payable to MAC and mail to:
P.O. Box 340, Cape May, NJ 08204-0340*

- Please bill me for the full amount*
 Please charge my credit card:*
- Visa MasterCard American Express Discover

**Fax completed form to 609-884-5064*

Card Number _____

Name *(please print)* _____

Address _____

City _____ State _____ Zip _____

Daytime Phone () _____

Signature _____

Would you like to receive emails from MAC with news
on upcoming events and special discounts? Yes No

Email Address _____

Mid-Atlantic Center for the Arts & Humanities
CELEBRATING OUR HISTORY...ENRICHING YOUR LIFE