



Donation Form

Name: _____

Business Name (if applicable): _____

Mailing Address: _____

Phone: _____ Email: _____

Individual Friends		Individual Business	
<input type="checkbox"/> Patron	\$20	<input type="checkbox"/> Shequaga	\$250
<input type="checkbox"/> Friend	\$50	<input type="checkbox"/> Schuyler	\$500
<input type="checkbox"/> Havana	\$100	<input type="checkbox"/> Tiffany	\$1,000
<input type="checkbox"/> Other	\$ _____	<input type="checkbox"/> Queen Catharine	\$1,000 +

Specialized program/service sponsorship is available. Please contact us at montourfalls@stls.org or (607) 535-7489

Is this an honor or memorial gift? No Yes (please fill out the bottom section)

I would like to remain anonymous (honor and memorial gifts are public but your name can be anonymous)

Please return this form and your donation to the Montour Falls Memorial Library in-person or via mail to:

Montour Falls Library
406 W Main St
PO Box 486
Montour Falls, NY 14865

Signature: _____ Date: _____

In honor of: _____ OR In memory of: _____
