



Donor Form

_____ \$1-249
 _____ \$250-499 Bronze
 _____ \$500-999 Silver
 _____ \$1,000-2,499 Gold

_____ \$2,500-4,999 Platinum
 _____ \$5,000-9,999 Sapphire
 _____ \$10,000+ Diamond

_____ Other ways you can help
 Please indicate you interest:

_____ Pledge: I would like to Pledge \$ _____ per year for the next _____ years. The best time to remind me of my pledge is in the month of _____. _____ now _____ monthly _____ quarterly _____ yearly

All Donations go to the general fund to support all Community projects. Unless specified for:

_____ Museum
 _____ Silver Gate Park
 _____ Shakespeare in the Park
 _____ Cemetery

Payment instructions: For tax donation purposes please make checks payable to the Cooke City Community Council (or CCCC).

Mail to: CCCC, P.O. Box 1134, Cooke City, MT 59020

Name: _____
 Address: _____

 City, ST, Zip: _____
 Phone: _____
 E-Mail: _____

Please list my gift in memory or honor of (please select one):

A letter of acknowledgement for your donation will be sent to you and whatever family member you specify:

Name: _____

Address: _____