



Give to AASLH

Choose a fund:

- Annual Fund Endowment Fund SHA Scholarship Fund
 Small Museums Scholarship Fund
 Other Designation _____

Please fill out this form, print clearly, and return to:
AASLH, 2021 21st Avenue S., Suite 320, Nashville, TN 37212

Name _____

Address _____

City, State, Zip _____

Email _____

AASLH Membership # _____

My donation is in honor or memory of _____

Please list my contribution as from (please print name):

Amount: \$50 \$175 \$250 Other \$ _____

Method of Payment:

My check is enclosed

Monthly charge my credit card in the amount of \$ _____ per month for _____ months

Please charge my credit/debit card one time

Name of Cardholder (print) _____

Card Number _____

Expiration _____ Security Code _____ Visa MC AmEx

Signature _____

Thank you for your support.

OR

Visit go.aaslh.org/give to donate online