Donation Form

This gift is... (please select only one option) *

- [ ] in honor of
- [ ] in memory of
- [ ] a general donation

What name would you like to appear on the book plate? *

In order for us to select something meaningful, please list some interests of the honoree. *

How much would you like to donate today? *

How would you like to pay this donation? *

- (•) PayPal
- ( ) Check
- ( ) Credit Card in the Library

Once you complete this form, please mail or drop off your check at the Library: 500 E. Mitchell St Petoskey MI 49770

Your first name: *

Your last name: *

Your street address (or PO Box) *

Apt or Suite #:

City: *

State: *

Zip or Postal Code *

Phone Number:

eMail:

Would you like someone else to be notified of this donation? *

- (●) Yes
- ( ) No

Please tell us the name and complete mailing address of the person you would like us to notify. *

Thank You for your donation.