

Yes! I want to give my support to the **Latin American Art Museum** with my gift or pledge in the amount of \$_____

Enclosed is my check payable to **Latin American Art Museum Inc.**

Charge my credit card: ___VISA ___ MC ___AMERICAN EXPRESS ___ DISCOVER

Name on card _____

Card Number _____

Expiration Date _____

Signature: _____

Please bill me _____ Monthly _____ Quarterly

Name _____

Address _____

City _____ State __ Zip _____

Email _____

Home phone _____ Work phone _____