



Chincoteague Natural History Association Assateague Lighthouse Restoration Fund

Name: _____
(Please Print)

Address: _____

City: _____ **State:** _____ **Zip:** _____

Home Phone: _____ **Work Phone:** _____

Email: _____

Please check all that apply:

- My employer will match my gift.**
- Please contact me about ways to make a planned gift.**
- Tell me more about ways to help. I'd like to be a lighthouse volunteer!**

I have enclosed a check for \$ _____
(Please make check payable to Assateague Lighthouse Restoration Fund.)

Or

Please charge my: **MasterCard** **Visa**

Name as it appears on card: _____

Card # _____

Expiration Date _____

Signature: _____

When completed, mail form to:
CNHA – Assateague Lighthouse Restoration Fund
P. O. Box 954
Chincoteague, VA 23336