

CONTRIBUTION FORM



I would like to help further the mission of the American Genre Film Archive in preserving, presenting, and promoting the greatest genre films in the world. I understand that my contribution is tax-deductible to the extent provided by law.

NAME: _____

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE NUMBER: _____ EMAIL: _____

I WISH TO MAKE A GIFT OF: \$ _____

I WOULD LIKE MY GIFT TO SUPPORT: Film preservation Home video AGFA general fund

GIVING LEVELS

- FRIEND: \$1-49
- HERO: \$50-99
- WARRIOR: \$100-249
- SUPERSTAR: \$250-499
- A GIFT ABOVE \$500

ACKNOWLEDGEMENT & CREDITS

Please print how you would like to be acknowledged in in our donor acknowledgement materials, including home video booklets, annual report, etc.

This preservation was made possible in part by the following genre warriors:: _____

CONTRIBUTION FORM



PAYMENT OPTIONS

CHECK

My check made payable to the American Genre Film Archive)is enclosed.

CREDIT CARD

Please charge my contribution to my credit card:

MasterCard Visa American Express Discover

NAME (as it appears on card): _____

CREDIT CARD: _____ EXPIRATION DATE: _____ CCV CODE: _____

SIGNATURE: _____

Monthly One-Time

DONATION MATCHING

I will reach out to my employer about matching my donation.

COMPANY NAME: _____

SIGNATURE: _____ DATE: _____

Return this form to:

American Genre Film Archive
3908 Avenue B
Austin, TX 78751

Have questions? Feel free to reach out:

e-mail: jackson.cooper@americangenefilm.com
americangenefilm.com