

letter of intent

BUILDING

GIFT AGREEMENT



DONOR CONTACT INFORMATION

Donor Name(s) _____
Organization (If Applicable) _____
Address _____ City, State, & Zip _____
Phone _____ Email _____

DONOR COMMITMENT & PURPOSE

The donor(s) hereby pledge to the Grand Forks Children's Museum the sum of \$_____.
It is understood and agreed that the gift will be used for the construction of the Grand Forks Children's Museum.

PAYMENT

It is understood and agreed that the gift will be paid in full on or before _____ or as may be further described hereafter in the event of an agreed payment schedule:

- | | |
|---------------------------------|---------------------------------|
| a. _____ due on or before _____ | d. _____ due on or before _____ |
| b. _____ due on or before _____ | e. _____ due on or before _____ |
| c. _____ due on or before _____ | f. _____ due on or before _____ |

SPECIAL REQUEST _____

I/we plan to make payment(s) through the following method:

- Check - Please make checks payable to the Grand Forks Children's Museum.
- Automatic Payment - ACH from Checking/Savings Account (Please attach a voided check/savings deposit slip)
- Automatic Payment - Debit/Credit Card (We will contact you to set up a payment schedule)
- Other - _____

BINDING OBLIGATION

The donor(s) intend this pledge to be fully enforceable against their estate to the extent that the obligation has not been satisfied by gifts completed following the date of this agreement.

DONOR RECOGNITION

The donor(s) agree to be publicity recognized upon the establishment of this gift and asked to be recognized as _____.

GIFT AGREEMENT

This Gift Agreement contains the entire understanding of the parties with respect to the subject matter of this agreement and is subject to the laws of North Dakota. This Gift Agreement may be amended only in writing and if signed by both parties. A Naming Agreement shall be signed in addition to this Gift Agreement when Naming rights are available and agreed upon.

Signature _____ Date _____

Signature _____ Date _____

Grand Forks Children's Museum
Representative Signature _____ Date _____



ADDITIONAL CONTACT INFORMATION

Additional Donor Name _____

Additional Donor Email _____

Additional Donor Phone _____

Preferred Salutation _____

MUSEUM NAMING OPPORTUNITIES

Naming opportunities are available for donors who have a commitment to the Grand Forks Children's Museum of \$25,000 or more. A full list of naming opportunities is available upon request from a GFCM representative. Please make note of naming interests below.

- Museum Naming
- Grand Lobby
- Exhibit Level - Land or Sky
- Grow Exhibit
- Land Exhibit(s) _____
- Sky Exhibit(s) _____
- Gallery and/or Art Installations _____
- Outdoor Space(s) _____
- Guest Space(s) _____
- Staff Space(s) _____

NOTES



Federal Tax ID: #87-0865807
PO Box 5126 | Grand Forks, ND 58206
GrandForksChildrensMuseum.com

The Grand Forks Children's Museum Inc. is a recognized 501(c)(3) nonprofit and all gifts to the Grand Forks Children's Museum are tax deductible to the extent provided by law. Please consult your tax advisor.