

Perkins Observatory Donation/Membership Form

1. ___ Yes, I want to make a donation to the Perkins Endowment: Amount: _____
2. ___ Yes. I want to be a Point of Light (Minimum \$200 Donation Per Star): Amount: _____
3. ___ Yes, I want to make a donation to the Operating Fund. Amount: _____
4. ___ Yes, I want to adopt a/an _____ : Amount _____

Total Amount Enclosed: _____

Name _____ Email _____

Address _____ Phone _____

City _____ State _____ Zip Code _____

(Please mail to: Perkins Observatory, 61 S. Sandusky St., Delaware, OH 43015.

Make checks available to "Perkins Observatory.")