



Yes, I would like to show my commitment to liberty!

Institute for Justice Contribution Form

DIRECTIONS:

Please print out the following form, fill in your information, and mail it to IJ:

Institute for Justice
901 N. Glebe Road, Suite 900
Arlington, VA 22203

DONATION:

* Please accept my contribution of:

- Friend (\$25)**
- Supporter (\$50)**
- Associate (\$100)**
- Senior Associate (\$500)**
- Partner (\$1,000)**
- Senior Partner (\$5,000)**
- Guardian (\$10,000)**
- Other _____ (Amount)**

PLEASE CHECK DESIGNATED BOXES: (* Required Fields)

- * This gift is: **One-time** **Monthly**
- * I'm a: **New Donor** **Existing Donor**

Thank you for your generous support!

BILLING INFORMATION: Prefix (circle one): **Mr.** | **Mrs.** | **Ms.** | **Dr.**

* Name: _____

* Address: _____

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

Phone: _____ Email: _____

Check enclosed:

Billed to (circle one): **VISA** | **Mastercard** | **American Express** | **Discover**

Card number: _____ Expiration date: _____

Name on the card: _____

Signature: _____

🔥 How did you hear about IJ? _____ (web search, friend, magazine ad, etc.)

🔥 This gift is: **In Celebration Of** **In Memory Of**

Name: _____



The individual (if any) whom IJ should let know about this gift:

Name: _____ Email: _____

Address: _____

City: _____ State: _____ Zip Code: _____