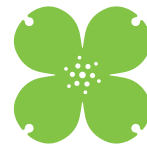


GIFT FORM



NORTH CAROLINA
BOTANICAL
GARDEN

I would like to contribute to these areas of special interest:

\$ _____ General Support (525201)

\$ _____ Director's Fund (525416)

\$ _____ Herbarium (525240)

\$ _____ Horticulture (525405)

\$ _____ Education (525237)

\$ _____ Other _____

\$ _____ General Operating Endowment (525253)

\$ _____ Natural Areas Endowment (525221)

\$ _____ Student Intern Endowment (525425)

\$ _____ Coker Arboretum Endowment (5252330)

\$ _____ Allen Education Center (525230)

\$ _____ Forest Theatre Restoration Fund (525270)

TOTAL \$ _____

Name(s) _____

Address _____

City _____

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Zip _____

Email Address (to receive monthly e-newsletter) _____

Telephone Number _____

Check payable to the
North Carolina Botanical Garden Foundation, Inc.

Credit card payment:
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Return to:

North Carolina Botanical Garden
Attn: Development
University of North Carolina at Chapel Hill
Campus Box 3375, Allen Education Center
Chapel Hill, NC 27599-3375

Account Number _____ / _____ \$
Exp.Date _____ Amount to Charge _____

Name on Card (please print) _____

Signature _____

Billing Information:

Name _____ Telephone Number _____

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