

Printer Friendly Contribution Form

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

(*Required Fields)

*Please accept my contribution of:

- | | |
|---|---|
| <input type="checkbox"/> Friend (\$25) | <input type="checkbox"/> Senior Partner (\$5,000) |
| <input type="checkbox"/> Supporter (\$50) | <input type="checkbox"/> Guardian (\$10,000) |
| <input type="checkbox"/> Associate (\$100) | <input type="checkbox"/> Defender (\$25,000) |
| <input type="checkbox"/> Senior Associate (\$500) | <input type="checkbox"/> Jurist Society (\$50,000) |
| <input type="checkbox"/> Partner (\$1,000) | <input type="checkbox"/> Thomas Paine Society (\$100,000) |
| <input type="checkbox"/> Other _____ (Amount) | |

*This is a One-time gift | Monthly gift
(please circle one)

*I'm a New Donor | Existing Donor
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Check enclosed:

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

Card number: _____ Expiration date: _____

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How did you hear about IJ?: _____
(i.e. - web search, letter, friend, magazine ad, etc.)

This gift is: In Celebration Of | In Memory Of
(please circle one)

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

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Thank you for sharing our commitment to liberty!