



Statement of Financial Commitment

DATE _____

Institution/Individual's Name _____

SAFE Program Liaison, Name and Email _____

Indicate your level of financial support and time period:

- (platinum) \$5000/year or more for 3 years
- (gold) \$2500-4999/year for 3 years
- (silver) \$1000-2499/year for 3 years

Please indicate amount / year: _____

Preferred month to receive Invoice: _____

\$ TOTAL _____

Or a one-time donation of \$ _____

Signature: _____ Title: _____

An invoice will be emailed to the SAFE Program Liaison as indicated above. Payment(s) will be made to: **Omaha Zoological Society**. Mailing address and account details will be included on the invoice.

Please return this form to Gayle Sirpenski gsirpenski@mysticaquarium.org

Thank you for supporting African penguin conservation!