

genealogy center gift certificate order form

PURCHASER _____ **RECIPIENT** _____
ADDRESS _____ **ADDRESS** _____
PHONE _____ PHONE _____
E-MAIL _____ E-MAIL _____

SEND GIFT CERTIFICATE TO _____ PURCHASER or _____ RECIPIENT

CHOOSE ONE OF THE FOLLOWING

Gift Certificate for Genealogical Research

_____ hours @ \$30/hour (Museum member rate) = \$ _____

_____ hours @ \$40/hour (Non-member rate) = \$ _____

Gift Certificate for Translations

_____ hours @ \$30/hour (Museum member rate) = \$ _____

_____ hours @ \$40/hour (Non-member rate) = \$ _____

TOTAL \$ _____

PAYMENT

_____ Cash _____ Check _____ MasterCard _____ Visa

Credit Card No. _____

Exp. Date _____ V-Code _____ Signature _____

OFFICE USE ONLY Date Received _____ Certificate No. _____



museum of
danish america

GENEALOGY CENTER

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