TRI-CITIES HISTORICAL

# MUSEUM SET. 1959 SE

## Donation Form Tri-Cities Historical Museum 200 Washington Ave., Grand Haven, MI, 49417

#### All information that must be filled out

Name of donor:	Date:			
Mailing address:	City:			
State:Zip:	Phone #:			
Email:				
Staff member accepting donation: _				
By these present, I irrevocably and unconditionally give to the Tri-Cities Historical Museum by way of gift, all rights, title and interests (including copyright and trademark) to the object(s) listed below. Furthermore, I affirm that I own said object(s) listed below and have a good and complete right to offer them to the Tri-Cities Historical Museum. I acknowledge that the Tri-Cities Historical Museum reserves the right to determine if and/or when an accepted gift will be exhibited.				
Signed:	Date:			
Staff member signature:	Date:			
	d, I acknowledge that the Tri-Cities Historical Museum will d interests to the object(s) listed below unless I request said			
If any part of th	is gift is declined, please check one option:			
Return the gift	Do not return the gift			

#### **Description of the gift**

Please use the space on continuation pages if necessary to further explain the relevance of the item or if you are donating two or more items please include detailed information on each item.

Description of the donation (describe what the item or items were previously used for):				
Approximate date it was made :				
Who used the item:				
Local relevance (why is it important to the history of North West Ottawa County):				

#### For Staff and Collection Committee Member Use Only

#### The donation must meet one of the following criteria:

Relates to our mission and collection goals				
Has exhibit or research potential				
Can be properly stored, protected, and preserved				
Fills an identified gap, replaces an inferior example, or does not represent an unnecessary duplication				
Accept Decline	Board Member:		_Date:	
Accept Decline	Board Member:		_Date:	
Accept Decline	Board Member:		Date:	
Accept Decline	Community Memb	er:	Date:	
Accept Decline	Community Memb	er:	Date:	
Accept Decline	Community Memb	er:	Date:	
Accept Decline	Collections Curator	r:	Date:	

\_\_\_\_Accept \_\_\_\_ Decline Exhibits Curator: \_\_\_\_\_ Date: \_\_\_\_

\_\_\_\_Accept \_\_\_\_ Decline Education Curator: \_\_\_\_\_ Date: \_\_\_\_\_

### Itemized list of objects in the donation:

Donor name:	Date:	
· · · · · · · · · · · · · · · · · · ·		
,		