

***Yes! I want to contribute to the
Best of French Culture!***

Name (First) _____ (Last) _____

Address _____

City _____ State _____ Zip _____

Phone (Home) _____ (Work) _____

Cell _____ Email _____

I have enclosed my gift of:

\$50

\$100

\$250

\$500

\$1,000

\$5,000

Check Enclosed

Visa

Master Card

Make checks payable to Alliance Française de Washington.

Credit Card # _____ Exp. Date _____

*Please note that the amount of your contribution is deductible as a charitable
contribution for federal income tax purposes.*

***Mail this completed form to:
Alliance Française de Washington
2142 Wyoming Avenue NW
Washington, DC 20008***