



**Nkwusm**  
 Nkwucm x'wt' qe Nuwéwlšt'n

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**Salish language Immersion Program  
 Contributions Form**

The Salish Language could become extinct in only a few short years.  
 Your donation will help save this language.

**YES – I want to help save the Salish Language.  
 I am pleased to enclose my tax-deductible donation in the amount of:**

**\$5000** \_\_\_\_\_ **\$1000** \_\_\_\_\_ **\$750** \_\_\_\_\_ **\$500** \_\_\_\_\_ **OTHER \$** \_\_\_\_\_

Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail \_\_\_\_\_ Phone \_\_\_\_\_

Total Amount Enclosed \_\_\_\_\_ **OR** Charge my credit card (**VISA/Mastercard only**)

\_\_\_\_\_  
**Card Number** \_\_\_\_\_ **Expiration Date (required)** \_\_\_\_\_

**Signature:** \_\_\_\_\_

*Please send donation checks payable to Nkwusm, P.O. Box 5 Arlee, Montana, 59821.  
 Nkwusm is a 501c3 nonprofit organization. Our tax ID number is 30-0086748. Your donation is tax deductible.  
 Thank you for your support!*

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**YOU MAY ALSO USE THIS FORM TO MAKE A PLEDGE OVER THREE YEARS RATHER THAN SUBMIT THE FULL PAYMENT. IF YOU WISH TO PLEDGE THE ABOVE AMOUNT OVER THREE YEARS, PLEASE FILL IN THE PLEDGE INFORMATION BELOW AND SUBMIT YOUR FIRST PLEDGE PAYMENT ALONG WITH THIS FORM.**

**YES – I wish to PLEDGE the above amount over a three-year period. I am pleased to enclose my first installment in the amount of \$** \_\_\_\_\_ **.**

**[I understand that I will be billed in two additional equal installments over the next two years]**

**Your Signature:** \_\_\_\_\_

*Thank you for your support of Nkwusm*