

YES, I want to help Oceana protect the world's oceans!

I want to make a: Monthly Donation One Time Donation

In the amount of: \$35 \$50 \$75 \$100 Other: _____

Your Name: _____

Email Address: _____

Yes, add me to Oceana's email list!

Phone Number: _____

Yes, add me to Oceana's SMS text messaging list!

Payment Type:

Enclosed is my check

I would like to pay via credit card

Please bill my: American Express Visa MasterCard

Card Number: _____

Expiration date: _____ CVV Code: _____

Billing Address: _____

Name on Card: _____

Signature: _____

If you would like to make your gift via a different method, please contact us at wavemaker@oceana.org.

Return this form to:

Oceana

Attn: Marketing Department

1025 Connecticut Avenue, NW Suite 200

Washington D.C. 20036