

Fifth Biennial Vesterheim Benefit Auction Bidder Registration Form

Vesterheim Norwegian-American Museum
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BIDDER REGISTRATION NUMBER: _____
(For your first bid, leave this blank, and you will be notified of your number by phone or e-mail.)

Basic Information

Name: _____

Shipping Address: _____

City, State, Zip: _____

Daytime Phone: _____ E-mail Address: _____

Bids

I would like to bid \$ _____ (amount) on object number _____

I would like to bid \$ _____ (amount) on object number _____

I would like to bid \$ _____ (amount) on object number _____

I would like to bid \$ _____ (amount) on object number _____

Bidding on October 25

Call me for these live auction items as the bidding starts _____

Call me before the close of the silent auction on these items _____

Phone number the night of the auction October 25 _____

Credit Card Information

(We will call before charging your credit card and will keep information confidential. You will still have the option of paying by check. For greatest security please fax or mail this form.)

Type _____ Number _____ Expiration _____
(Am Express, Discover, MC, VISA)

Shipping Options

_____ I plan to pick up my pieces _____ Ship UPS _____ Priority Mail

I agree to pay for all items for which I am the highest bidder and agree to all other terms of the auction as listed above.

Signed: _____ Date: _____

Form must be signed to be considered valid.