

Ohio Designer Craftsmen's

# 2017 Challenge Drive

Name \_\_\_\_\_

Address \_\_\_\_\_ city, state, zip \_\_\_\_\_

email \_\_\_\_\_ phone \_\_\_\_\_

Please accept my contribution of  \$35  \$50  \$75  \$100  \$250  \$1000

Check  Visa  MC # \_\_\_\_\_ exp. date \_\_\_\_\_

Challenge Drive Award  Artist Scholarship Award

I would like to fund an award myself (other than the Scholarship Award; minimum \$250).  
ODC will contact you upon receipt for clarification.

If received before February 28, 2017, your contribution will be acknowledged in the exhibition catalog. Your contribution is tax deductible. Please make checks payable to ODC and mail to ODC/Best of 2017 Challenge Drive, 1665 West Fifth Avenue, Columbus, OH 43212.