



Membership Form

BE A MEMBER. JOIN TODAY!

Date: _____

Type: New Member Renewal

Name (as you wish to be recognized): _____

Address: _____

City: _____ State: _____ Zip Code: _____

Email Address: _____

Phone (H): _____ Phone (W): _____

Membership Categories:

Student (*21 and under, must show valid student ID*) ...\$25

Individual\$50

Family\$75

Members names for discount purposes:

Contributor\$150

Small Business\$200

(includes benefits of a Member for 5 employees)

Patron \$350

Benefactor/Corporate.....\$1,000

(includes 20% discount on a facility rental annually, 10% on special event advertising & benefits of a Member)

Saint/Corporate\$2,500

(includes 30% discount on a facility rental annually, 15% on special event advertising & benefits of a Member)

Lifetime\$10,000

(includes special recognition of a permanent plaque, an exhibit in your honor & benefits of a Saint)

Matching: Will your company match contributions?: Yes No Not Sure

If yes, what is company contact information?: _____

I'm interested in: Volunteering Sponsoring an Event Other: _____

Payment: Mastercard Visa Discover Check Enclosed (*payable to Aiken Center for the Arts*)

Card #: _____ Exp. Date: _____

Signature: _____

Return completed form to: Aiken Center for the Arts , 122 Laurens Street, SW, Aiken, SC 29801