

Kentuck Membership Form

Mr/Mrs/ Ms/ Mr &Mrs/ Dr
Name:

(As you would like it to appear on your membership card)

- I am a **new** Kentuck Member
- I am a **renewing** Kentuck Member with no changes in contact information
- I am a **renewing** Kentuck Member, but my information has changed

Address _____

City _____ State _____ Zip _____

Home Phone _____ Work Phone _____

Email _____ Please send me information electronically.

MEMBERSHIP LEVELS

- \$20 Courtyard** **\$100 Art Center** **\$500 Fire Ant**
- \$50 Studio** **\$200 Museum** **\$1000 Big Dog (Rusty)**
- \$75 Gallery**

PAYMENT OPTIONS

A check payable to Kentuck for \$_____ is enclosed.

I would like to make an additional contribution of \$_____ for Kentuck's ongoing operations.

Please charge \$_____ to MasterCard Visa

Account Number _____ Expiration Date _____ Signature _____

Matching Gift Form enclosed Matching Gift Processing Center has been contacted

Employer _____

- Please contact me with information on the **Volunteer Program**

Additional comments:

