

# Membership Form

Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ E-Mail \_\_\_\_\_

Phone (      ) \_\_\_\_\_

Please choose one of the Three (3) Membership Options. Indicate amount in space provided.

1. **Sustaining Member**, **monthly** through ACH form (automatic withdrawal)

(\$10 or more per month) \_\_\_\_\_ (Enclose ACH form and a Voided check or Deposit slip.)

2. **Patron Member**, **annual** (\$100 or more) \_\_\_\_\_ (cash, check, credit or automatic withdrawal)

3. **Individual Member**, **annual** (\$35) \_\_\_\_\_ (cash, check, credit)

Payment Method mark one: Check \_\_\_\_\_ (payable to Steelville Arts Council) Cash \_\_\_\_\_

Mastercard \_\_\_\_\_ Visa \_\_\_\_\_ Discover \_\_\_\_\_

Credit Cardholder Name (Print) \_\_\_\_\_

Cardholder Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Card Number \_\_\_\_\_ Expiration date (Month) \_\_\_\_ (Year) \_\_\_\_

Signature \_\_\_\_\_

**Be inspired. Please, be a proud member of the Steelville Arts Council. Thank You!**