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# SHORELINE *Arts* ALLIANCE

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## Membership Form

Date \_\_\_\_\_

Name \_\_\_\_\_

Preferred Listing for Programs, website, etc. (i.e. John and Jane Smith ~ or ~ John Smith and Jane Perry)

Street \_\_\_\_\_ Town \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_ Cell \_\_\_\_\_

E-mail(s) \_\_\_\_\_

### PATRON MEMBERSHIP LEVELS

- \_\_\_\_\_ Angel \$5,000+
- \_\_\_\_\_ Benefactor \$2,500+
- \_\_\_\_\_ Arts Patron \$1,000+

### INDIVIDUAL MEMBERSHIP LEVELS

- \_\_\_\_\_ Associate \$500
- \_\_\_\_\_ Family \$100
- \_\_\_\_\_ Individual \$75
- \_\_\_\_\_ Artist \$55
- \_\_\_\_\_ Student \$25 (must enclose copy of student ID)

### Thank you for supporting the arts!

All membership contributions are greatly appreciated and are tax-deductible to the extent of the law.

### Special Interests: *Please check all that apply*

- Creative Writing    Culinary Arts    Cultural Center Creation
- Dance    Fundraising
- Healing Arts    Music    Photography
- Scholarships    Theatre    Visual Arts
- Volunteering    Other \_\_\_\_\_

\$ \_\_\_\_\_ **Membership**

\$ \_\_\_\_\_ **Additional Contribution**

\$ \_\_\_\_\_ **Total Enclosed**

**Checks made payable to: Shoreline Arts Alliance  
63 Wall Street, Madison, CT 06443**

### Pay by credit card:

- Visa    Master Card    Discover    AmEx

Name on Card: \_\_\_\_\_

Billing Address:  Same as above/or

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Card #: \_\_\_\_\_

Expiration: \_\_\_\_\_ CSC: \_\_\_\_\_

