

# STORM KING ART CENTER

## JOIN OR RENEW YOUR MEMBERSHIP

### CONTACT INFORMATION

MEMBERSHIP LEVEL \_\_\_\_\_

PRIMARY MEMBER NAME *(if this is a gift fill out portion below)* \_\_\_\_\_

SECOND MEMBER NAME *(Dual & above)* \_\_\_\_\_

PRIMARY MEMBER BIRTHDAY \_\_\_\_\_ SECONDARY MEMBER BIRTHDAY \_\_\_\_\_

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

### PAYMENT INFORMATION

ENCLOSED IS MY CHECK, PAYABLE TO STORM KING ART CENTER

ANNUAL MEMBERSHIP FEE \$ \_\_\_\_\_

ADDITIONAL TAX-DEDUCTIBLE CONTRIBUTION \$ \_\_\_\_\_

### **GIFT MEMBERSHIP** *(if applicable)*

GIFT RECIPIENT NAME(S) \_\_\_\_\_

RECIPIENT BIRTHDAY(S) \_\_\_\_\_

### **GIFT RECIPIENT ADDRESS**

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

Please mail completed form to:

Storm King Art Center, Membership Department, 1 Museum Road, New Windsor, NY 12553

Or Fax to: 845-534-4457

For questions, email [membership@stormkingartcenter.org](mailto:membership@stormkingartcenter.org) or call 845.534.3115 x7105