

Your membership supports programs and exhibitions at Telfair Museums. Thank you!

**MEMBER INFORMATION**

Title	First Name	Middle Initial	Last Name	Suffix	Birthdate MM/DD/YYYY	M/F Gender
-------	------------	----------------	-----------	--------	----------------------	---------------

Primary Mailing Address

City	State	Zip Code
------	-------	----------

Phone (Home or cell; please circle one)	E-mail Address
---	----------------

Work Phone	Employer
------------	----------

SECOND MEMBER (Dual level and above)	Relationship	Birthdate MM/DD/YYYY	M/F Gender
--------------------------------------	--------------	----------------------	---------------

E-mail Address	Phone
----------------	-------

**MEMBERSHIP CATEGORIES**

	CATEGORIES	PRICE	TOTAL
GENERAL	Individual	\$50	\$ _____
	Dual/Family*	\$80	\$ _____
	Senior (Age 65+)	\$40	\$ _____
	Dual Senior/ Active Military	\$70	\$ _____
	Artist	\$40	\$ _____
	Teacher	\$40	\$ _____
	Active Military	\$40	\$ _____
CONTRIBUTING	Student	\$25	\$ _____
	Friend^	\$150	\$ _____
	Donor	\$500	\$ _____
DIRECTOR'S CIRCLE	Patron	\$1,000	\$ _____
	Grand Patron	\$1,500	\$ _____
	Steward	\$2,500	\$ _____
	Benefactor	\$5,000	\$ _____
	Curator's Council	\$10,000	\$ _____
Director's Council	\$15,000	\$ _____	
Chariman's Council	\$25,000+	\$ _____	

\*2 Adults and children under 18  
 ^Access to 800+ museums in the US, visit [narmassociation.org](http://narmassociation.org) for more information.

 \_\_\_\_\_ Student /Teacher \_\_\_\_\_  
 Please list your school

\_\_\_\_\_ Artist: Please share your artist statement no more than 100 words on the back of this form. Please include your medium, motivation, inspiration, or process.

Please list your website if you have one \_\_\_\_\_

**GIFT MEMBERSHIP**
**GIFT GIVER INFORMATION**

 MAIL GIFT TO:  Recipient  Gift Giver

 MAIL RENEWAL TO:  Recipient  Gift Giver

Title	First Name	Last Name	Suffix
-------	------------	-----------	--------

Address

City	State	Zip
------	-------	-----

Phone	E-mail Address
-------	----------------

**PAYMENT INFORMATION**

TOTAL AMOUNT PAID \$ \_\_\_\_\_

METHOD OF PAYMENT (make checks payable to Telfair Museums)

 CASH  CHECK (No. \_\_\_\_\_)  CREDIT CARD

 MasterCard  VISA  American Express Sec.Code \_\_\_\_\_

Credit Card No. \_\_\_\_\_

Signature \_\_\_\_\_ Exp. \_\_\_\_\_

 I wish to enroll in auto-renewal (credit card info required).

 I wish to receive a physical membership card.

**MEMBER AFFINITY GROUPS**

MUST BE A CURRENT GENERAL MEMBER OF TELFAIR MUSEUMS TO JOIN

	INDIVIDUAL	DUAL	TOTAL
<b>Telfair Contemporaries</b>	\$100	\$150	\$ _____
Governing		\$250	\$ _____
Sustaining		\$500	\$ _____
<b>Friends of African-American Arts</b>	\$25	\$35	\$ _____
<b>Friends of Owens-Thomas House</b>	\$100	\$150	\$ _____
Richard Richardson		\$250	\$ _____
George W. Owens		\$500	\$ _____
Margaret Gray Thomas		\$1,000	\$ _____
<b>Gari Melchers Collectors' Society</b>	\$500	\$750	\$ _____
Julian Story Sponsor		\$1,000	\$ _____
Frederick Carl Frieseke Friend		\$1,500	\$ _____
Carl Brandt Backer		\$2,500	\$ _____
George Bellows Benefactor		\$5,000	\$ _____
<b>Telfair Academy Guild</b>	\$50	SUPPORTER \$65	\$ _____