



Complete this form and fax to (559) 441-4227 or mail with payment (please do not include cash) to 2233 N. First Street, Fresno, CA 93703, Attn: Membership

GIFT MEMBERSHIP ENROLLMENT FORM

Yes, I would like to send the gift of a Fresno Art Museum Membership:

- \$25 Student/Senior/Educator
- \$50 Student/Senior/Educator Couple
- \$50 Individual
- \$75 Dual/Family
- \$100 Family Plus- includes up to 3 Planet Art Memberships**
- \$150 Contributing - Western Museum Reciprocal Group
- \$300 Sustaining
- \$500 Benefactor
- \$1,000 Directors Circle

Payment Method

Check Enclosed Cash Amount: \$_____ **or** Credit Card : VISA MASTER CARD

NUMBER: _____ EXP. DATE: ___/___

FROM INFORMATION:

NAME(S) Mr/Mrs/Ms/Dr

ADDRESS

CITY/STATE/ZIP

BUSINESS AFFILIATION

BUSINESS TELEPHONE

HOME TELEPHONE

E-MAIL ADDRESS

TO INFORMATION:

NAME(S) Mr/Mrs/Ms/Dr

ADDRESS

CITY/STATE/ZIP

BUSINESS AFFILIATION

BUSINESS TELEPHONE

HOME TELEPHONE

E-MAIL ADDRESS
