



SUSTAINING MEMBERSHIP FORM
 2012/5772

NAME _____

ADDRESS _____

CITY, ST, ZIP _____

EMAIL ADDRESS _____

MEMBERSHIP INFORMATION

	Quantity	Total
SUSTAINING	\$1,250 x _____ =	_____
SUSTAINING YOUTH 13-21 years old	\$500 x _____ =	_____
SUSTAINING CHILDREN 12 & under	\$300 x _____ =	_____
SUSTAINING GUEST limit 1 Guest per Member	\$1,000 x _____ =	_____

TOTALS: QUANTITY = _____ AMOUNT = \$ _____

I would like to show my support for Temple of the Arts with a contribution of \$ _____

TOTAL AMOUNT DUE = \$ _____

PAYMENT INFORMATION

PAYMENT METHOD: CHECK CREDIT CARD PAYPAL (Click here)

AMOUNT \$ _____

CREDIT CARD # _____ EXP. DATE _____

NAME ON CREDIT CARD _____

SIGNATURE _____

I hereby authorize TEMPLE OF THE ARTS to charge the above account the amount of: \$ _____

Signature: _____ Date: _____