

MEMBERSHIP FORM

Please fill out completely and return with payment. **PLEASE PRINT** clearly and legibly below.

Today's Date: _____ *** Your Membership is valid for **one year** from this date.

Name _____ Phone _____

Mailing Address _____

City: _____ State _____ Zip _____

Email _____

Please select your Membership Level

Membership Level

- | | |
|---|---|
| <input type="radio"/> Adult/ Individual | Cost per year
\$50 per person |
| <input type="radio"/> Student (13-17) | \$25 per person |
| <input type="radio"/> Household (2 adults & children under 18 in household) | \$100 per household/family |
| <input type="radio"/> Senior (Age 65+) | \$35 per person |

RACC Membership benefits:

notifications of events and programs via online newsletter, 10% discount on rentals, discounts on various activities including classes, community events and concerts, and a membership card.

Patron of the Arts Memberships

Membership Level

- | | |
|---|---------------------------------------|
| <input type="radio"/> Supporter | Cost per year
\$100 - \$199 |
| <input type="radio"/> Advocate | \$200 - \$299 |
| <input type="radio"/> Benefactor | \$300 - \$399 |
| <input type="radio"/> Philanthropist | \$400 - \$499 |
| <input type="radio"/> Grantor | \$500 - \$999 |
| <input type="radio"/> Grace A. Carpenter Foundation | \$1000 or more |

Benefits (all Patron of the Arts memberships include benefits of the levels before them)

Name in Holiday House Shopper's Guide

- 2 Free Admission Passes to Holiday House
- 2 Tickets to Sip Into Spring
- 2 Tickets to the Holiday House Gala
- 2 Additional tickets to the Holiday House Gala
- Free Admission to events & Name on Recognition plaque

For Household Memberships, please include the names of people in your household:

In addition, I would like to donate the amount of \$ _____ to the following:

- Building & Grounds
 The Owl & The Silver Moon Preschool
 General Operating Funds
 ARTLETICS Summer Day Camp
 Endowment Fund

Payment Type: ***Please make checks payable to RACC or Rome Art & Community Center.

Cash
 Check, Ck # _____
 Credit Card: VISA
 Master Card
 Discover

Credit Card # _____ Exp. Date _____ CVV Code _____

Signature _____

YES! I am interested in becoming an RACC Volunteer. I would like to help with the following:

Events/Performances
 Gallery Openings/Receptions
 Office Assistance
 Halloween

Holiday House Other: _____