

# WHEATONARTS

AND CULTURAL CENTER

## Membership Application

New Member \_\_\_\_\_ Renewing Member \_\_\_\_\_

Mr. \_\_\_ Mrs. \_\_\_ Ms. \_\_\_ Dr. \_\_\_ Other \_\_\_\_\_

Name \_\_\_\_\_

2<sup>nd</sup> Card Name (Household Level and above) \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Daytime telephone \_\_\_\_\_ (circle one: Home Work Mobile)

E-mail address \_\_\_\_\_

*Please Note: Members will receive WheatonArts **E-News** as well as other mailings.  
WheatonArts respects the privacy of its members and does not share its mailing or e-mail lists.*

Membership Level (*please indicate one*)

- Student* \$ 25
- Senior* \$ 35
- Individual* \$ 45
- Household* \$ 65
- Sustaining* \$ 110
- Contributing* \$ 260
- Patron* \$ 500
- Collector's Circle* \$1,000

Membership Payment \$ \_\_\_\_\_

Additional contribution \$ \_\_\_\_\_

**Total Amount** \$ \_\_\_\_\_

\_\_\_\_\_ Check enclosed (made payable to **WheatonArts**)

\_\_\_\_\_ Please call me at the above number to obtain my credit card information.

*Please return this **Membership Application** to:*

**WheatonArts; 1501 Glasstown Road; Millville, NJ 08332.**

*Membership is tax-deductible to the extent allowed by law. Please allow two weeks for processing.*