



# KODIAK ARTS COUNCIL



*Kodiak Baranof Productions, Inc., P.O. Box 1792  
Kodiak, Alaska 99615 (907)486-5291 Fax (907)486-5591  
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## **ANNUAL MEMBERSHIP FORM**

**July 1, 2010 to June 30, 2011**

NAME \_\_\_\_\_ DATE \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TELEPHONE Home \_\_\_\_\_ Business \_\_\_\_\_ email \_\_\_\_\_  
(please update)

### **All members receive:**

- A voice on matters concerning the arts at the annual and general meetings of KAC.
- A 10% discount on tickets to events presented by KAC (not available for season tickets)
- E-Mails with special notification of upcoming arts events and arts information.
- Your name (Individual, Family or Business) published on our donor list (website and programs; anonymity respected)

Please indicate how you would like your listing published if different from above.

### **You may join as an individual, family or business.**

We ask you to be as generous as you can - remember that all contributions are tax deductible.

We have a small business category at \$50.00; larger business category at \$100.00.

A special thanks to those businesses who show their support at \$500.00, \$1,000.00 and more.

Thank you for your concern and support of the arts and our community. It really does make a difference.

____ Student/Senior Citizen	\$ 15.00
____ Member	25.00
____ Family	45.00
____ Contributor	50.00 - 99.00
____ Supporter	100.00 - 349.00
____ Sponsor	350.00 - 499.00
____ Patron	500.00 - 999.00
____ Benefactor	1000.00 - 1999.00
____ Guardian Angel	2000.00 and over
____ Event Sponsor	Please contact the office.

\_\_\_\_ I would like to join at the Contributor or higher level and make \_\_\_\_ payments of \$\_\_\_\_\_.

### **Please make all checks payable to the Kodiak Arts Council.**

**You may pay by Credit Card (through *PAYPAL* or *Vendini*) on our website ([kodiakartscouncil.org](http://kodiakartscouncil.org)) or by filling in the information below and returning the entire form to our office.**

Please charge to my Credit Card - Visa / Master Card # \_\_\_\_\_ Exp. \_\_\_\_\_

Name as it appears on card \_\_\_\_\_ Phone \_\_\_\_\_

Amount \_\_\_\_\_ Signature \_\_\_\_\_