

BECOME A MEMBER

MASS MoCA

CHOOSE A LEVEL

- \$50 Individual
- \$80 Dual/Family
- \$150 Contributor
- \$250 Associate
- \$500 Contemporary Circle
- \$1,000 Director's Forum
- \$5,000 Angel

Complete this form and mail to:
MASS MoCA Membership Office
1040 MASS MoCA Way
North Adams, MA 01247

For information, call 413.664.4481 ext. 8112
or email cmcilhenny@massmoca.org.

MEMBERSHIP IS FOR A FULL YEAR AND IS NON-TRANSFERABLE.

YOUR INFO

- DR. MR. MRS. MR. & MRS.

NAME

NAME ON SECOND CARD (APPLIES TO DUAL/FAMILY LEVEL AND ABOVE)

I PREFER A "GUEST OF" CARD

STREET

CITY

STATE

ZIP

PHONE

EMAIL

PAYMENT OPTIONS

ENCLOSED IS MY CHECK, PAYABLE TO MASS MOCA, IN THE AMOUNT OF \$ _____

PLEASE CHARGE MY

VISA/MASTERCARD

AMERICAN EXPRESS

DISCOVER

NAME AS IT APPEARS ON CREDIT CARD

ACCOUNT #

EXPIRES

SIGNATURE

GIFT MEMBERSHIP

I would like to give a membership as a gift (fill in below)

GIFT MEMBERSHIP FROM:

GIFT MEMBERSHIP TO:

NAME

NAME (S)

STREET

STREET

CITY

STATE

ZIP

CITY

STATE

ZIP

PHONE

EMAIL

PHONE

EMAIL