

LEVELS • PLEASE CHECK ONE

- | | |
|---|----|
| <input type="checkbox"/> \$10,000+ Trillium | \$ |
| Membership Benefits of Angelica plus a 4-week residency named in your honor | |
| <input type="checkbox"/> \$5,000+ Angelica | \$ |
| Membership Benefits of Jack-in-the-pulpit plus Premier Host status for all events, an Angelica Circle Dinner with Hambidge artists held at Hambidge and a two-week residency named in your honor | |
| <input type="checkbox"/> \$2,500+ Jack-in-the-pulpit | \$ |
| Membership Benefits of Hearts-a-bustin, plus Host status for Spring Gala, U-Do-Raku, and Annual Auction, special recognition on the website and all invitations | |
| <input type="checkbox"/> \$1,000+ Hearts-a-bustin | \$ |
| Membership Benefits of Lady Slipper plus Host level status of the Lectures and U-do-Raku | |
| <input type="checkbox"/> \$500+ Lady Slipper | \$ |
| Membership Benefits of Laurel plus invitation to open studio nights at Hambidge | |
| <input type="checkbox"/> \$250+ Laurel | \$ |
| Membership Benefits plus free reserved Nature Hikes | |
| <input type="checkbox"/> \$100 Friend of Hambidge | \$ |
| Membership Benefits: Hambidge e-newsletter, invitations to all events, select programs at Hambidge, reserved picnic at the mill | |
| <input type="checkbox"/> \$50 Artist | \$ |
| Membership Benefits: Hambidge e-newsletter, invitations to all events, select programs at Hambidge, reserved picnic at the mill | |
| <input type="checkbox"/> I wish to donate | \$ |
|
 | |
| <input type="checkbox"/> Please contact me about other opportunities for giving to Hambidge, or about corporate sponsorships. | |
|
 | |
| <input type="checkbox"/> I am adding an extra \$5 to my membership to support the national Alliance of Artists Communities of which Hambidge is a member. My gift will advance the work of AAC nationwide. | \$ |

TOTAL AMOUNT ENCLOSED \$



PAYMENT: Hambidge accepts Visa, MasterCard, American Express, checks, cash and securities.

CORPORATE MATCHING GIFT PROGRAMS CAN SUBSTANTIALLY INCREASE YOUR CONTRIBUTION. PLEASE CONTACT YOUR PERSONNEL OFFICE FOR INFORMATION.

Enclosed is a check to Hambidge or please charge: VISA, MasterCard, American Express

Your name (Please Print)

Visa MasterCard Amex Card # _____ Expiration Date _____ / _____

Signature _____

Address _____ City _____ State _____ Zip _____

Phone _____ E-mail _____

Hambidge, a non-profit arts organization, depends upon the generosity of its members and patrons. All members will be listed in the e-newsletter. Your gift is tax deductible as allowed by law.