

New Member____ Renewal____ Today's Date_____

I would like to become, or continue to be, a member of the Arts Council of Kern.

Name_____ Phone#_____

Address_____ City_____

State_____ Zip_____ e-mail_____

Membership Levels – Mark one

Student \$15_____ Senior \$20 (60+)_____ Individual \$30_____

Family \$55_____ Business \$150_____ Non-Profit \$30_____

Charge Visa/MC #_____ Exp. Date_____

Membership year runs from January 1 through December 31. From June 1 until the end of the year, dues are half-price. **100% OF YOUR DUES ARE TAX DEDUCTIBLE.**