

MEMBERSHIP FORM

Mail to:

Arts Council of Johnson County

P.O. Box 12543

Shawnee Mission, KS 66282-2543

_____ \$10 SPECIAL ARTS CONGRESS ADVOCATE MEMBERSHIP OFFER

Additional Categories:

_____ Grand Patron \$20,000 and higher

_____ Benefactor \$15,000

_____ Partner \$10,000

_____ Underwriter \$5,000

_____ Scholar \$2,500

_____ Patron \$1,000

_____ Colleague \$500

_____ Contributor \$250

_____ Friend \$100

_____ Donor \$50

_____ Advocate \$15

Name _____

Company _____

Address _____

City _____ State _____ Zip _____

Phone _____ email _____