

ALLEGHANY HIGHLANDS ARTS & CRAFTS CENTER

PO Box 273 – Clifton Forge, VA 24422 – (540) 862-4447

Membership and Contribution Form

YES, I would like to support the visual arts with my membership and a tax deductible contribution as indicated below:

Name(s): _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Phone: _____

Membership Types:

Family (parents and children through 18 years of age)	\$30.00
Individual (19 years of age and older)	\$20.00
Student (under 19 years of age)	\$ 8.00

Membership Fee _____ Date: _____

Contribution Amount _____

Total Enclosed _____

This gift is in memory of: _____

Acknowledgement of gift to (if different from above): _____

Name(s): _____

Mailing Address: _____

City: _____ State: _____ Zip: _____