

# ART GALLERY

OF GREATER VICTORIA

New \_\_\_\_\_ Renewal # \_\_\_\_\_

Rejoin \_\_\_\_\_ Lost Card # \_\_\_\_\_

Date _____
------------

Cardholders	Surname	First Name	Initial	Title <i>(circle one)</i>
Member (primary)*				Miss/Ms./Mrs./Mr./Dr.
Member (secondary)				Miss/Ms./Mrs./Mr./Dr.
Child (under 18)			(Age)*	
Child (under 18)			(Age)*	
Child (under 18)			(Age)*	
Child (under 18)			(Age)*	

Street Address*	
City/Province*	Postal Code*
Phone*	Email

**Areas marked with \* MUST be filled in or membership can not be processed. Thank you!**

- I/we would **not** like to be invited to attend quarterly events
- I/we would **not** like to receive the monthly e-newsletter.

Membership	1 year \$	2 year \$	Additional Donation * (Charitable portion)	Total	Membership Plus- <i>All annual membership benefits plus:</i>	Yearly \$	Monthly \$
Individual	50	95			<b>Friends</b> <i>Plus: Complimentary admission to over 300 art Galleries and museums throughout North America; Listing in AGGV; Annual Report and 10% discount on Art Rental and Sales</i>	<input type="checkbox"/> 150	<input type="checkbox"/> 12
Household	70	130					
Student	20	n/a			<b>Curator's Circle</b> <i>Plus: Recognition on the Donor Wall</i>	<input type="checkbox"/> 500	<input type="checkbox"/> 40
Senior	40	75					
Out of Town Individual	40	n/a			<b>President's Circle</b> <i>Plus: Invitation to quarterly social events including receptions at private homes</i>	<input type="checkbox"/> 1000	<input type="checkbox"/> 85
Out of Town Household	60	n/a					

\*Tax receipts issued less the membership fee

*\*Charitable receipts will be issued in this amount*

**For any questions regarding Membership Plus please contact Mark Loria, Director of Development, at 250.384.4171 ext. 230 or at mloria@aggv.bc.ca**

- I/we would like our donation to remain anonymous

- Cash    Debit    Visa    MasterCard    Amex    Cheque

Credit Card \_\_\_\_\_ exp \_\_\_\_\_

Signature \_\_\_\_\_