

# Become a Member!

Name(s) \_\_\_\_\_  
(as you wished to be acknowledged)

Address \_\_\_\_\_

City/State/ZIP \_\_\_\_\_

Daytime Phone \_\_\_\_\_

Evening Phone \_\_\_\_\_

E-mail Address \_\_\_\_\_

## I would like to join Friends of Art at the following level:

- Donor (\$100–\$249)
- Contributor (\$250–\$499)
- Sponsor (\$500–\$749)\* (\$15 nondeductible)
- Art Advocate (\$750–\$1,199)\* (\$15 nondeductible)
- Print Master (\$1,200–\$2,499)\* (\$600 nondeductible)
- Benefactor (\$2,500–\$4,999)\* (\$600 nondeductible)
- Arts Patron (\$5,000+)\* (\$600 nondeductible)

\* You may opt out of certain benefits to make your gift tax deductible to the fullest extent of the law.

- I would like to relinquish my involvement in certain benefits to make my gift tax deductible to the fullest extent of the law.
- I have attached my company's matching gift form to increase my level of support.

## Payment Method

A. A check (payable to GMU Foundation) in the amount of \$\_\_\_\_\_ is enclosed.

B. Please charge \$\_\_\_\_\_ to my credit card:  
 Visa  MasterCard  American Express

C. I would like to join through a payment plan.

Please charge \$\_\_\_\_\_

(every  month,  quarter,  six months) for a total of

\$\_\_\_\_\_ to my credit card:

Visa  MasterCard  American Express

Cardholder Name (please print): \_\_\_\_\_

Card# \_\_\_\_\_

Exp. Date \_\_\_\_\_

Signature \_\_\_\_\_

**Please return to: Friends of Art**  
George Mason University  
4400 University Drive, MS 4C1  
Fairfax, VA 22030