

To join or renew your membership, mail or fax this form today:

SAN ANTONIO MUSEUM OF ART

Membership Office

200 West Jones Avenue • San Antonio, Texas 78215

Fax: 210.978.8101

Name: _____

Address: _____

City/State/Zip: _____

Telephone: _____ E-mail: _____

TYPE OF MEMBERSHIP: NEW RENEWAL GIFT*

MEMBERSHIP CATEGORY:

- | | |
|---|--|
| <input type="checkbox"/> \$35 Educator | <input type="checkbox"/> \$125 Sponsor |
| <input type="checkbox"/> \$35 Artist | <input type="checkbox"/> \$225 Sponsor (2 yrs) |
| <input type="checkbox"/> \$35 Senior Citizen | <input type="checkbox"/> \$250 Associate |
| <input type="checkbox"/> \$60 Senior Citizen (2yrs) | <input type="checkbox"/> \$475 Associate (2 yrs) |
| <input type="checkbox"/> \$45 Individual | <input type="checkbox"/> \$500 Patron |
| <input type="checkbox"/> \$80 Individual (2 yrs) | <input type="checkbox"/> \$1,000 Society |
| <input type="checkbox"/> \$75 Family | <input type="checkbox"/> \$5,000 Benefactor |
| <input type="checkbox"/> \$130 Family (2 yrs) | <input type="checkbox"/> \$10,000 Leader |
| <input type="checkbox"/> \$60 Senior Family | <input type="checkbox"/> \$25,000 Philanthropist |
| <input type="checkbox"/> \$100 Senior Family (2yrs) | |

SUPPORT GROUPS:

- | | Friend (\$50) | Connoisseur (\$150) |
|--------------------------------------|--------------------------|--------------------------|
| Friends of Decorative & American Art | <input type="checkbox"/> | <input type="checkbox"/> |
| Friends of Ancient Art | <input type="checkbox"/> | <input type="checkbox"/> |
| Friends of Asian Art | <input type="checkbox"/> | <input type="checkbox"/> |
| Friends of Contemporary Art | <input type="checkbox"/> | <input type="checkbox"/> |
| Friends of Latin American Art | <input type="checkbox"/> | <input type="checkbox"/> |

AMOUNT

Membership \$ _____
Support Group(s) \$ _____
Additional Donation \$ _____
Total amount enclosed \$ _____

* This gift is from:

Name _____
Address _____
City _____
State _____ Zip _____
Phone _____ E-mail: _____

METHOD OF PAYMENT:

Enclosed is my check for \$ _____
Payable to the San Antonio Museum of Art

I paid online by credit card.

Please click the gray box below to submit your application. If an email does not automatically open, please save the pdf file to your desktop and attach it to an email addressed to membership@samuseum.org

Thank you!

SUBMIT

For your convenience, you can also charge your membership by telephone!

CALL 210.978.8133 AND JOIN TODAY!