

MEMBERSHIP APPLICATION FORM

Please complete this form and bring it to the Design Store.
Alternatively email it to friends@christchurchartgallery.org.nz.

PLEASE TICK IF THIS IS A RENEWAL

MEMBERSHIP IS FOR ME/US A GIFT

*NAME(S)

POSTAL ADDRESS

POSTCODE

*PHONE

*EMAIL

DATE

MEMBERSHIP CATEGORY

- | | |
|--|-------------|
| <input type="radio"/> INDIVIDUAL | \$65 |
| <input type="radio"/> DOUBLE | \$90 |
| <input type="radio"/> FAMILY (2 adults and children under 18 at the same address) | \$90 |
| <input type="radio"/> STUDENT (with ID) | \$40 |
| <input type="radio"/> MAKE A DONATION | _____ |

PAYMENT METHOD

- AT GALLERY DESIGN STORE**
- PURCHASE ONLINE**
CHRISTCHURCHARTGALLERY.ORG.NZ/FRIENDS

WANT TO RECEIVE THE GALLERY ENEWSLETTER?

- PLEASE KEEP ME UP-TO-DATE
- NO THANKS, I DON'T WISH TO RECEIVE ENEWSLETTERS

