

CANTOR ARTS CENTER ANDERSON COLLECTION

Name(s) _____

Street _____

City/State/Zip _____

Phone _____ E-mail _____

SUID# _____ RENEWAL DATE _____

(please update the above information if necessary)

PAYMENT METHOD or renew online at twomuseums.stanford.edu

VISA Mastercard American Express CHECK: Please make payable to Stanford University

Credit Card # _____ Expires _____

Signature _____

For deposit to HAFOZ-43110-PKMU

MEMBERSHIP LEVELS

	AMOUNT	Tax-Deductible Portion
<input type="checkbox"/> FRIEND	\$ 75	\$ 75
<input type="checkbox"/> FAMILY/ DUAL	100	100
<input type="checkbox"/> SPONSOR	200	200
<input type="checkbox"/> PATRON	300	240
<input type="checkbox"/> BENEFACTOR	600	510
<input type="checkbox"/> ARTISTS CIRCLE	1,000	890
<input type="checkbox"/> CONNOISSEURS CIRCLE	2,500	2,350
<input type="checkbox"/> NEW FOUNDERS CIRCLE	5,000	4,850
<input type="checkbox"/> DIRECTORS CIRCLE	10,000	9,650
<input type="checkbox"/> DIRECTORS GOLD CIRCLE	25,000	24,620
<input type="checkbox"/> ADDITIONAL CONTRIBUTION \$ _____		

*Double your membership—ask your company about matching gifts
(even if you are retired)*

Please do not release my name to similar institutions