



Membership Application

Categories & Contributions

(please check)

- | | |
|--|---|
| <input type="checkbox"/> Individual (\$45) | <input type="checkbox"/> Connoisseur (\$600) |
| <input type="checkbox"/> Dual (\$75) | <input type="checkbox"/> Ambassadors Council (\$1200) |
| <input type="checkbox"/> Family (\$90) | <input type="checkbox"/> Student/Senior Individual (\$35) |
| <input type="checkbox"/> Supporter (\$150) | <input type="checkbox"/> Student/Senior Dual (\$60) |
| <input type="checkbox"/> Patron (\$300) | |
- Additional tax-deductible contribution to the JACCC: \$ _____
- My employer's Matching Gift Form is enclosed.

Member Information

Title First Name Last Name

Address _____

City/State/Zip _____

Home Phone: _____ Work Phone: _____

Email: _____ Fax: _____

Name for Additional Membership Card (Dual level and above)

Title First Name Last Name

Payment Options

- Check made payable to: JACCC
- Visa MasterCard American Express

Card #: _____ Exp. Date: _____

Signature: _____

Name on Card and/or Billing Address (if different):

