



**Springfield
Museum of
Art**

A Smithsonian Affiliate



1. Choose your level.

- ___ Individual \$50
- ___ Duo/Family \$80
- ___ Reciprocal \$150
- ___ Friend \$300
- ___ Supporter \$600
- ___ Patron \$1,000
- ___ Ambassador \$2,500
- ___ Benefactor \$5,000

2. Confirm your information. *Note any changes or updates directly on this sheet.*

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Preferred Phone: _____

Email: _____

3. Payment details. *Renew online! Visit our website and select Support > Join the Museum.*

___ **My check payable to Springfield Museum of Art is enclosed.**

___ I have included an additional gift of \$_____ with my membership renewal designated for:

- Education Endowment Exhibitions Where Needed Most

___ **Please charge my card.**

Credit Card Number _____

Expiration Date _____ Security Code/CVV _____

Signature _____