

Name _____
Address _____
City _____ St _____ Zip _____
Telephone Number _____ email _____

Membership(s) _____ \$ _____
Donation for _____ \$ _____
\$ _____ Total
Cash _____ Check _____ Visa _____ MasterCard _____ Discover _____

Make Checks Payable to: **Bismarck Art & Galleries Association**
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CCV # _____ Expiration Date _____

Name as it appears on card _____

Membership Level

____ Rembrandt _____ Household (\$60/year)
____ (Pledge of \$350 for 4 years) _____ Individual (\$50/year)
____ Donor (\$501 or more) _____ Senior (\$40/year)
____ Contributor (\$100-\$500) _____ Artist (\$40/year)
____ Business (\$100-\$500)
____ Non-Profit Org (\$60.00)

Please Complete:

Would you volunteer for BAGA special events?
Capital A'Fair Pop Stand _____
Reception Hors D'Oeuvres _____
Fundraising Events (wine taste, festival of the arts) _____
Cookie Walk _____

Return this form with your payment to:

Bismarck Art & Galleries Association

422 E. Front Ave.

Bismarck, ND 58504

Phone: 701-223-5986

Web site: www.bismarck-art.org

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