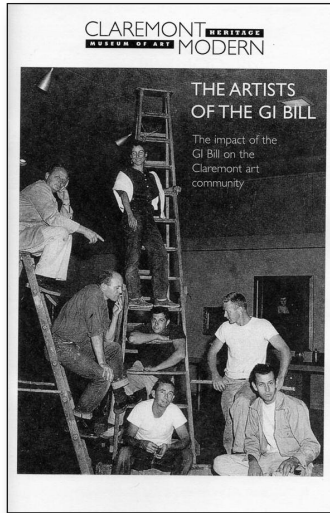


CLAREMONT

MUSEUM OF ART

Yes, I want to be a member of the Claremont Museum of Art

I want to be a part of the Museum and its mission to support and promote the arts in Claremont through its events, exhibitions and education programs.



- Basic Annual Membership \$40**
- For an individual or couple
 - Invitation to member-only Artful Evening events at the homes of area art collectors
 - Subscription to the CMA quarterly newsletter

- Premium Membership \$100**
- Basic benefits plus
 - Recognition in the museum newsletter
 - Complimentary 20-page booklet *The Artists of the GI Bill*

- Premium Plus Membership \$250**
- Premium benefits plus
 - Recognition on the Museum website

- Platinum Membership \$1,000**
- Premium Plus benefits plus
 - Complimentary admission to Artful Evenings

Name _____ Email _____

Address _____ City _____ State _____ Zip _____

I/We would like to be listed as _____

I/We have enclosed a check for \$ _____ or please charge \$ _____ to my account

I/We would like to make an additional donation of \$ _____

Credit Card # _____ Expiration Date _____

Signature _____ Phone _____

Please return this form to: Claremont Museum of Art, P.O. Box 1136, Claremont, CA 91711

For more information call 909 621-3200 or email info@claremontmuseum.org

P.O. Box 1136, Claremont, CA 91711 / www.claremontmuseum.org