

The Museum of Modern Art

Corporate Membership Enrollment

YES! We would like to become a MoMA Corporate Member at the following level of annual support:

- ☐ \$60,000 **SPONSOR***
- ☐ \$15,000 **BENEFACTOR**
- ☐ \$40,000 **PARTNER***
- ☐ \$7,500 **ASSOCIATE**
- ☐ \$25,000 **LEADER***
- ☐ \$3,000 **FRIEND**

Our one-year Corporate Membership should begin on:
..... (month)/ (year)

*If your company is joining at the Leader level or above and has subsidiaries that should receive Corporate Membership privileges, please attach a list.

.....

COMPANY INFORMATION

.....
Company Name

.....
Company Acknowledgment Name (Exactly as it should appear in MoMA corporate acknowledgment, press mentions, etc. Indicate if anonymous.)

.....
Approximate Number of Employees: Locally (NY, NJ, CT area) Globally

PRIMARY CONTACT

.....
Name

.....
Title

.....
Company

.....
Street Address

.....
City/State/Zip

.....
Phone Fax

.....
E-mail

CEO

.....
Name

.....
Title

.....
Company

.....
Street Address

.....
City/State/Zip

.....
Phone Fax

.....
E-mail

Please send renewal information to:
☐ Primary Contact
☐ CEO

Please send benefits to:
☐ Primary Contact
☐ CEO

Checks should be made payable to The Museum of Modern Art.
Please send enrollment form and contribution to:

Corporate Membership
The Museum of Modern Art
11 West 53 Street
New York, NY 10019-5497

MoMA Tax ID# 13-1624100
We will notify you upon receipt of payment.

If you would like to make your contribution with a credit card,
please call (212) 708 9840.

.....
Name of person completing this form (print)

.....
Signature

.....
Date