

Membership Enrollment

- \$85 INDIVIDUAL
- \$140 DUAL
- \$175 FAMILY
- \$360 FELLOW
- \$600 SUPPORTING
- \$1,200 SUSTAINING
- \$1,750 PATRON
- \$3,000 BENEFACTOR
- \$5,000 FAMILY COUNCIL
- \$6,000 SUSTAINING BENEFACTOR
- \$12,000 MAJOR BENEFACTOR

DISCOUNTED

- \$50 STUDENT
For full-time students only with valid ID and e-mail

- \$35 ARTIST
For working artists who have exhibited in the past 2 years
(PLEASE SHARE A RECENT CV OR EXHIBITION ANNOUNCEMENT)

- \$70 GLOBAL

ADD-ON PROGRAM

- \$125 FILM PLUS
(EMAIL REQUIRED FOR INVITATIONS)

MEMBER INFORMATION (PLEASE PRINT)

- NEW RENEWAL ID #

.....

NAME (MS./MRS./MR./M./MX./DR.)

.....

ADDRESS APT.

.....

CITY STATE

.....

ZIP/POSTAL CODE COUNTRY

.....

PHONE (REQUIRED)

.....

E-MAIL

PREFERENCES

- I would prefer to receive my monthly Member Calendar via:
- MAIL E-MAIL
- I would like Automatic Renewal:
- ENROLL IN AUTOMATIC RENEWAL AND SAVE 10%.
- YES (CREDIT CARD REQUIRED) NO

IF DUAL MEMBERSHIP OR HIGHER

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SECOND CARDHOLDER NAME (MS./MRS./MR./M./MX./DR.)

IF FAMILY MEMBERSHIP OR HIGHER

.....
CHILD'S CARD NAME (MISS/MR.) DOB (MM/YY)

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CHILD'S CARD NAME (MISS/MR.) DOB (MM/YY)

GIFT DONOR INFORMATION

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GIFT DONOR NAME (MS./MRS./MR./M./MX./DR.)

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DONOR'S ADDRESS APT.

.....
CITY STATE

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ZIP / POSTAL CODE COUNTRY

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PHONE (REQUIRED)

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E-MAIL

METHOD OF PAYMENT

- Cash or Check (MAKE PAYABLE TO MoMA)
- AmEx Visa MasterCard Discover JCB

.....
AMOUNT \$

.....
CARD NUMBER

.....
CVV2/CVC2 EXPIRATION (MM/YY)

.....
SIGNATURE

MAIL TO: The Museum of Modern Art
Department of Membership
11 West 53 Street
New York, NY 10019

QUESTIONS? Call 888 999-8861 (TOLL-FREE IN THE U.S.)

**Your membership supports programs and exhibitions
at The Museum of Modern Art. Thank You.**

