

ACWR Membership Application Form

Please print out and complete this membership form and return it with your payment to:

Arts Council - Windsor & Region (ACWR)

1942 Wyandotte Street East, Windsor, Ontario N8Y 1E4

Phone: (519) 252-6855 Fax (519) 252-6553 E-mail: acwr@mnsi.net

Please accept my application for membership. I have checked the appropriate box below.

Individual - \$30

Family - \$45

Senior - \$20

Student - \$20

Non-Profit - \$45

Business - \$125

LIFETIME - \$250

New Membership Rates (above) effective January 1, 2009

Name _____

Organization _____

Address _____

City _____ Province _____ Postal Code _____

Phone _____ Fax _____ E-mail _____

In addition to my membership, I would also like to make a tax deductible donation of \$ _____ to the Arts Council - Windsor & Region.

I do not wish to obtain a membership at this time but would like to make a tax deductible donation of \$ _____ to the Arts Council - Windsor & Region.

ARTS COUNCIL - WINDSOR & REGION THANKS YOU FOR YOUR SUPPORT