



2024 SEASON

MEMBERSHIP APPLICATION

Name _____

Address _____ City/State/Zip _____

Phone (_____) _____ - _____ Email (optional) _____

Please indicate membership level:

SEASON MEMBERSHIPS

Single / \$80

Family / \$130

SPONSORSHIPS

Business Partner / \$500 +

SUPPORTING MEMBERSHIPS

Single Benefactor / \$110

Family Benefactor / \$180

Patron of the Arts / \$250

Director's Circle / \$375 +

Family memberships include parents and children under 18.

Donation to the James and Ilse White Memorial Student Concerts \$ _____

All contributions over the basic single and family memberships may qualify for a tax deduction.

Please mail this application along with your check to

MUSIC ON THE DIVIDE • Post Office Box 1055 • Georgetown, CA 95634

For more information, please call (530) 350-8354



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