



2015 - 2016 Membership Form

I would like to join the Anchorage Opera Guild/Renew my membership at the following tax-deductible level. My membership will be from July 1st, 2015 to June 30th, 2016.

Membership: \$10.00 Student \$20.00 Single \$30.00 Family

I'd like to make a general donation in support of the Opera Guild \$ _____

I'd like to donate to the Guild's End of Year Party for the Anchorage Opera chorus and orchestra \$ _____

Call 279.2557 to donate directly to Anchorage Opera.

Total Enclosed: \$ _____

I know someone that might like to join the Guild (name, phone): _____

Volunteering

I would like to volunteer at Anchorage Opera Guild and Anchorage Opera events: YES!! No

Information and Payment Data

Name(s): _____

Mailing Address: _____

Preferred Phone: _____ Alt/Msg Phone: _____

Email: _____

Method of Payment: Check (payable to Anchorage Opera Guild) Visa Master Card Credit Card

Number: _____ Exp. Date: _____ CVV: _____

Name on Credit Card: _____

Street, City and Zip Code of Credit Card billing address (if different than above): _____

Signature: _____ Date: _____

Please return this completed form, and your check, if applicable, to:
Anchorage Opera Guild Membership Chairperson P. O. Box 240481 Anchorage, Alaska 99524-0481