## **Ukrainian Museum and Library of Stamford Membership Form**

Yes, I would like to	become a member of the Ukrainian	Museum and Library of Stamfor	d
Select one catego	ory of membership:		
Family, \$100	☐ Supp	Supporter, \$500	
☐ Individual, \$5	0 Patro	Patron, \$1,000	
Seniors, \$25	☐ Benef	Benefactor, \$2,500	
Students, \$25	☐ Spon	Sponsor, \$5,000	
Gift Contributions are	tax-deductible in accordance with fe	deral and state law. We accept o	orporate matching gifts to cultural institutions.
Please fill out the			o, poi aco i i aco i i gina co cantalla i i i aco i aco i a
	Tomi Below.	7	
Your Name:			
Address:			
City:			
State:			
Zip:			
Tel.:			
E-mail:		Ukrainian Mu	hecks payable to: seum and Library of Stamford
Date:		14 Peveril Roa Stamford, CT	
To pay your mem	bership fee with a credit card, please	fill out the form below:	
□ VISA □ I	MASTERCARD		
Card Number:		Expiration Date:	
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