ART ALLIANCE MEMBER FORM

_____ NEW    _____ RENEWING    _____ DATE

NAME: ____________________________________________________________________________

ADDRESS: ____________________________________________________________________________

CITY, ST, ZIP: _______________________________________________________________________

EMAIL: ____________________________________________________________________________

DAYTIME PHONE: ___________________________ EVENING PHONE: ________________________

I prefer to receive meeting notices via: ______ Email or ______ Phone
I prefer to receive meeting notes via: ______ Email or ______ U.S. mail

Members of the Art Alliance are automatically a Friend of the David Owsley Museum of Art. In order to streamline the renewal process, one form of payment, made payable to Ball State University Foundation, will cover your Friends membership and Alliance membership.

PLEASE INCLUDE FUND NUMBER 711 IN THE MEMO LINE OF YOUR CHECK.

<table>
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<tr>
<th>David Owsley Museum of Art Alliance</th>
<th>Fund 711:</th>
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<td>$ 50.00</td>
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Additional contribution (optional) $ __________

TOTAL CONTRIBUTION ENCLOSED $ __________

Send check for Friends and Alliance memberships payable to Ball State University Foundation, or

Charge my credit card: Number ____________________________ Exp.: ________ CVV: ______

Signature __________________________________________________________________________

Renewals are due by December 31 to ensure inclusion in the next Alliance booklet.

Return to: Ball State University Foundation, 2800 West Bethel Avenue, Muncie, IN 47304

Thank you for your support of the David Owsley Museum of Art!

Office use:
☐ Forward this form to DOMA
☐ Make a name tag (new members)
☐ Update the Alliance member database
☐ Update the booklet
☐ Send an Alliance booklet
☐ Inform Alliance president, vice president, and director of education when the above is completed.