

Art Alliance Member Form

New Renewing _____ Date

Name: _____

Address: _____

City, State, Zip: _____

Email: _____

Phone: _____

I prefer to receive meeting notices via: Email Phone

I prefer to receive the Alliance booklet as a: PDF Printed Copy

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 will cover your Friends membership and Alliance membership.

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

DOMA Art Alliance Membership Fee:	\$ 50.00
Additional Contribution (optional):	\$
Total Contribution Enclosed:	\$

Checks for Friends and Alliance memberships make payable to **Ball State University Foundation**, or

Credit Card Number: _____ Exp: _____ CVV: _____

Signature: _____

Return to: David Owsley Museum of Art, 2021 W Riverside, AR 216, Muncie, IN 47306

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

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