



*Please circle membership category*

Cultural Organization	\$50.00
Support Organization	50.00
Education (Public, private schools)	50.00
Business/Corporation	60.00
Patron (Individual or family)	50.00
Individual	25.00

Date \_\_\_\_\_

Individual, Organization or Business Name \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Business Phone \_\_\_\_\_ FAX # \_\_\_\_\_

Home Phone \_\_\_\_\_ (For individual members)

**Organization or Business Members please name a representative.**

Representative's Name \_\_\_\_\_

Mailing Address (**If different**) \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_ Home Phone \_\_\_\_\_

Business Phone \_\_\_\_\_ FAX # \_\_\_\_\_

E-Mail (please include) \_\_\_\_\_

Please include names and addresses of current board members, if applicable.

**Make checks payable to the Odessa Council for the Arts & Humanities. Mail to P.O. Box 7195, Odessa, TX 79760.**