



2009 Donation/Membership Form

Name _____
Prefix Mr. Mrs. Ms. Miss Dr. Other _____

Spouse name _____
Prefix Mr. Mrs. Ms. Miss Dr. Other _____

Children's names _____

Family Name (ex. Smith Family, or Smith/Jones Family) _____

Street Address _____

City _____ State _____ Zip _____

Phone (home) _____ (work) _____ (cell) _____

E-mail (we will not share your e-mail address) _____

How would you like to be acknowledged (e.g., John and Mary Smith, The Smith Family, In honor of, etc.)? _____

Support Type

Please Select One: Gift Membership

If Gift

I would like to support BlackRock with an unrestricted gift in the amount of \$ _____

If Membership

Supporter (\$50) Artist (\$125)
 Seneca Club Donor (\$300) Seneca Club Patron (\$500) Seneca Club Impresario (\$1,000)

Payment

Payment method (check one, including if paying by check):

Check (payable to BlackRock Center for the Arts)
 VISA MasterCard Discover American Express

Cardholder (name as it appears on card) _____

Credit card number _____ Security Code _____

Expiration date _____ Signature _____

Return your entire form with payment to:

Development Manager
BlackRock Center for the Arts
12901 Town Commons Drive
Germantown, Maryland 20874
Or fax to: 301.528.2266