

## **Membership Registration Form**

Name: Address:	Date:	
City, State: Zip:		
2022 FAB Individual Annual Membership Dues		\$1500.00
(100% of your donation is tax deductible)		
Please add my spouse/partner to my FAB membersh	iip	\$750.00
Spouse's Name:		
Spouse's		
Email:	Phone:	
I would like to make an additional donation to FAB: _		
I would prefer to remain anonymous: ☑Yes	☑No (Circle One	)
Please make this gift in honor of (optional):		
	Total Donation	n: \$
Please indicate preferred payment method: ☑ Che	ck ☑ Credit Card ☑ Oth	ner: (Circle One)
Credit Card #:	Expiration Date:	CVC:
	<u> </u>	

Make your check payable to: Funding Arts Broward 1350 E. Sunrise Blvd., Suite #110 Fort Lauderdale, FL 33304

https://www.paypal.com/cgi-bin/webscr?cmd= s-xclick&hosted button id=GUK2EGWHSP5QS

ARTS BROWARD, INC. REGISTRATION #CH16211, IS REGISTERED WITH THE STATE UNDER THE SOLICITATION OF CONTRIBUTIONS ACT. A COPY OF THE OFFICIAL REGISTRATION AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING TOLL-FREE 800-435-7352 WITHIN THE STATE. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL, OR RECOMMENDATION BY THE STATE.

Funding Arts Broward is a tax-exempt organization pursuant to Section 501(c)3 of the Internal Revenue Code, as amended. EIN is 20-0151317.