



CHALLIS ARTS COUNCIL
MEMBERSHIP FORM

208-879-2745
challisarts@custertel.net

NAME _____

ADDRESS _____

CITY/ST/ZIP _____

PHONE _____

EMAIL _____

Membership Levels:

Benefactor	\$500 and up
Founder	\$201 - \$499
Patron	\$101 - \$200
Contributor	\$51. - \$100
Friend	\$25 - \$50

_____ Please put a check on the line if you are
willing to volunteer

Please complete and mail this form to:
CAC, PO Box 1131, Challis ID 83226

*Address label shows last payment of membership dues
Memberships are for 12 consecutive months