



Kelly Fitzpatrick Memorial Gallery

Individual or Business Name

Contact Name (if applicable)

Address

City

State

Zip Code

Phone

Email Address

## MEMBERSHIP FORM

Thank you for your support of The Kelly! For questions about different membership levels, please visit [www.thekelly.org](http://www.thekelly.org) or email [kwillis@elmore.rr.com](mailto:kwillis@elmore.rr.com).

- |  |   |
|--|---|
| <input type="checkbox"/> \$5000 – Kelly Fitzpatrick Finest | <input type="checkbox"/> \$250 – Advocate of the Arts |
| <input type="checkbox"/> \$2500 – Fitzpatrick Fellow       | <input type="checkbox"/> \$100 – The Kelly's Friend   |
| <input type="checkbox"/> \$1000 – Kelly Benefactor         | <input type="checkbox"/> \$50 – Kelly Supporter       |
| <input type="checkbox"/> \$500 – Patron of the Arts        |   |

## PAYMENT METHOD

- Check Enclosed (Please make checks payable to **The Kelly** and mail to: P. O. Box 641 Wetumpka, AL. 36092)

- Visa    MasterCard    Discover    American Express

Cardholder Name (as it appears on card) \_\_\_\_\_

Card Number \_\_\_\_\_ Exp. Date \_\_\_\_\_

Signature \_\_\_\_\_ Amount Paid \_\_\_\_\_