



New Member Organization Application Form

Date: _____

Organization Name: _____

How many members do you have? _____ Do you have formal 501(c)3 status? [] Yes [] No

Organization Info:

Website: _____

Mailing Address: _____

City _____, IN Zip Code: _____

Phone Number:(_____) _____ Fax:(_____) _____

E-mail: _____

Primary Contact Person:

Name: _____

Mailing Address (if different): _____

City _____, IN Zip Code: _____

Phone Number:(_____) _____ E-mail: _____

Treasurer/Bookkeeper:

Name: _____

Mailing Address (if different): _____

City _____, IN Zip Code: _____

Phone Number:(_____) _____ E-mail: _____

Dues are based on the annual budget of your organization:

[] \$1-\$5000 = \$50 [] \$5001-\$10,000 = \$65

[] \$10,001-\$50,000 = \$90 [] \$50,001+ = \$140

Please make checks payable to the Tippecanoe Arts Federation.

Return to Application To:
Tippecanoe Arts Federation
638 North St
Lafayette, IN 47901

For questions:
(800) 721-2787
(765) 423-2787
taf@tippecanoearts.org

For office use only.

Member Organization Type:

[] Non Profit Arts/Cultural [] For Profit Arts/Cultural [] Community Partner

Updated in [] QB [] Constant Contact [] Giftworks [] Website