



# Member Organization Renewal

Date \_\_\_\_\_

Organization Name \_\_\_\_\_

**Has any of your organization's information changed since last year? If yes, complete this entire form. If no, complete only the membership dues portion.**

## Organization Info

Website \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number ( \_\_\_\_\_ ) \_\_\_\_\_ Fax Number ( \_\_\_\_\_ ) \_\_\_\_\_

E-mail \_\_\_\_\_

## Primary Contact Info

Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number ( \_\_\_\_\_ ) \_\_\_\_\_ E-mail \_\_\_\_\_

## Treasurer/Bookkeeper Info

Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number ( \_\_\_\_\_ ) \_\_\_\_\_ E-mail \_\_\_\_\_

**Dues are based on the annual budget of your organization. Please select one of the options below.**

\$1 - \$5,000 = \$50     \$5,001 - \$10,000 = \$65     \$10,001 - \$50,000 = \$90     \$50,001+ = \$140

**Please make checks payable to the Tippecanoe Arts Federation. Mail with completed form to:**

Tippecanoe Arts Federation  
PO Box 174  
Lafayette, IN 47902

For office use only.

Member Organization Type     Nonprofit Arts/Cultural     For Profit Arts/Cultural     Community Partner

Updated in     QB     Website     Excel     GiftWorks     Constant Contact