



## MEMBERSHIP / DONATION FORM

Yes, I would like to activate/renew my membership to the Chopin Foundation!  
(Please check one membership level)

- |                          |                              |                   |                          |
|--------------------------|------------------------------|-------------------|--------------------------|
| <input type="checkbox"/> | <b>Corporate/Sponsor</b>     | <b>\$5,000.00</b> |                          |
| <input type="checkbox"/> | <b>Benefactor</b>            | <b>\$1,000.00</b> |                          |
| <input type="checkbox"/> | <b>Patron</b>                | <b>\$500.00</b>   |                          |
| <input type="checkbox"/> | <b>Dual Membership</b>       | <b>\$350.00</b>   |                          |
| <input type="checkbox"/> | <b>Individual Membership</b> | <b>\$200.00</b>   |                          |
| <input type="checkbox"/> | <b>Additional Gift</b>       | <b>\$_____</b>    |                          |
|                          |                              |                   | <b>TOTAL: \$_____</b>    |
| <input type="checkbox"/> | <b>Renewal</b>               |                   | <input type="checkbox"/> |
|                          |                              |                   | <b>New Member</b>        |

- I cannot join now, but enclosed is my tax deductible gift in support of the Chopin Foundation and its programs: \$\_\_\_\_\_
- Please contact me regarding planned giving, and/or in-kind contribution

Post-concert elegant buffet dinner(s) @ \$60 pp/per concert:

- November 19, 2017 # \_\_\_\_\_ @\$60 = \$\_\_\_\_\_
- January 21, 2018 # \_\_\_\_\_ @\$60 = \$\_\_\_\_\_
- April 15, 2018 # \_\_\_\_\_ @\$60 = \$\_\_\_\_\_

**TOTAL: \$\_\_\_\_\_**

Please make check payable to: **Chopin Foundation of the United States**

My/Our check for \$\_\_\_\_\_ is enclosed.

Name: \_\_\_\_\_ Spouse/Partner \_\_\_\_\_

Mailing address: \_\_\_\_\_

City, State, Zip code: \_\_\_\_\_

Day phone #: \_\_\_\_\_ Evening/cell #: \_\_\_\_\_

Email: \_\_\_\_\_

Mail to: **Chopin Foundation of the United States**  
**1440 79<sup>th</sup> St. Causeway, Suite 117**  
**Miami, FL 33141**

To pay by credit card please visit [www.chopin.org](http://www.chopin.org) (see Membership tab)  
or call (305) 868-0624 for more information and assistance.