

HONORARY COMMITTEE FORM

By becoming a member of the Honorary Committee, you are helping to nourish our region's arts and culture for generations to come. All Honorary Committee members will be acknowledged on the invitation and in the program. To accept your place on the Honorary Committee, please complete the enclosed form and return it to the gallery along with your check or credit card payment information.

To guarantee inclusion on the invitation, you must reply by September 26th.
The deadline for recognition in the program book is **October 27th.**

I/we are unable to attend, but please accept my/our donation in the amount of \$_____

Name(s):

(Please list all names as you would like them to appear in the program and on the invitation)

Address: _____

City, State, Zip: _____

Email: _____ Phone number: _____

I wish to make the payment by:

____ Check (Payable to Albany Center Gallery)

____ Credit card

Name on credit card: _____

Card number: _____

Visa | MC | AmEx | Discover (circle one)

Expiration date: _____ CV: _____

Total amount: \$_____

Level I | **Level II** | **Level III** (circle one)

Individual | Couple (circle one)

Signature: _____

Thank you again for your support!

NEW ADDRESS: Albany Center Gallery, 488 Broadway, Suite 107, Albany, NY 12207