



You Belong Here

Membership Renewal Form 2016/17

Regular Membership privileges include:

- Free Unlimited Admission
- Invitations to Exhibition Openings
- Discounts for all BNG events
- Listing in BNG Annual Report

Regular Membership Dues:

- | | |
|--|------|
| <input type="checkbox"/> Individual | \$50 |
| <input type="checkbox"/> Student / Senior (over 65) | \$10 |
| <input type="checkbox"/> Family (spouse & children under 18) | \$75 |

Contributing Membership privileges include:

- All Regular Membership privileges
- Reciprocal Membership with over 800 museums in the U.S., Canada & Mexico (NARM)

Contributing Membership Dues:

- | | |
|------------------------------------|-------|
| <input type="checkbox"/> Friend | \$150 |
| <input type="checkbox"/> Associate | \$300 |
| <input type="checkbox"/> Fellow | \$600 |

Director's Circle Membership privileges include:

- All Contributing Member privileges
- Invitations to Director's Circle Preview for each exhibition opening
- Use of Gallery for private entertaining at discount

Director's Circle Membership Dues:

- | | |
|-------------------------------------|-------------------|
| <input type="checkbox"/> Patron | \$1,000 - \$2,499 |
| <input type="checkbox"/> Benefactor | \$2,500 - \$4,999 |
| <input type="checkbox"/> Sponsor | \$5,000 plus |

Corporate Membership privileges include:

- All Director's Circle privileges
- Listing on Corporate signage at Gallery entrance
- Additional benefits based on level of support

Corporate Membership Dues:

- | | |
|-------------------------------------|-------------------|
| <input type="checkbox"/> Fellow | \$1,000 - \$2,499 |
| <input type="checkbox"/> Patron | \$2,500 - \$4,999 |
| <input type="checkbox"/> Benefactor | \$5,000 - \$9,999 |
| <input type="checkbox"/> Sponsor | \$10,000 plus |

2016/17 Membership Renewal Form

Please complete and return this form to the BNG via mail, email to membership@bng.bm, or fax to 441-295-2055.

PLEASE NOTE ANY CHANGES IN YOUR CONTACT INFORMATION

Title: Mr. / Mrs. / Ms. / Miss / Dr.	2016/17 Membership Level:	
Name:	Dues: \$ _____	Cheque is enclosed <input type="checkbox"/>
Address:	Please charge my: VISA MASTERCARD	
Parish/State: Code:	Card #: _____	
Country:	Expiry Date: ____ / ____	
Phone #: (home) (work)	Signature: _____	
Are you receiving our newsletters?		Email: _____
Direct Deposit: Bermuda Fine Art Trust HSBC a/c# 010-368322-001 *Please reference your full name & membership level	BNG mailing address: Suite 191, 48 Par-la-ville Rd, Hamilton HM11	

☐ Please send information about how I may include the Bermuda National Gallery in my will or trust.

Thank you for your continued support!