



Membership is for one person for one year and is renewable.

If this is a Gifted Membership, please fill it out for the recipient.
If this is a company or non-profit, please fill out with their information and contact information.

Please sign me up for the following Missouri Humanities Membership level:

Choose Membership Level:

Supporter \$25 Friend \$50 Contributor \$100 Partner \$250 Patron \$500 Benefactor \$1000

Discount Code: _____

Member's Contact Information

Title (Mr/Mrs/Dr/Honorable) _____

First Name _____

Last Name _____

Company Name _____

Spouse/Partner Name _____

Address _____

Address 2 _____

City _____ State _____ Zip _____

Cell Phone _____

Home Phone _____

Work Phone _____

Email _____

How did you hear about our Membership Program? _____

This membership is a gift from: _____

Giver's Contact Information: Email: _____ Phone: _____

Payment Method

Checks should be made payable to **Missouri Humanities**

Mailing Address: Missouri Humanities, PO BOX 270166, Kansas City, MO 64127 Attn: Memberships

Card Holder Name _____

Card Account Number _____

Expiration Date _____ Security Code _____

Billing Address

Same As Above

Address _____

Address 2 _____

City _____ State _____ Zip _____

Privacy Policy

We take precautions to protect your information. We collect credit card or bank account information, names, addresses, and other data related to your transaction when you make a payment through our site. We use this information to process your payment.

Upon registering for this event, you agree to receive emails from Missouri Humanities.

Any data collected will not be shared with third parties other than those stated above and is used only within this organization and co-host organizations. Any individually identifiable information related to this data will never be used in any way different to that stated above without your explicit permission.

Terms/Conditions

By submitting your payment, you authorize us to charge the account above for the amount specified in the *Transaction Amount* field. Account information for Recurring Pledges/Monthly Giving is encrypted and stored securely via SafeSave™ for automatic processing of your future payments. Notify us at any time if you wish to discontinue your pledge.

Photo Release

Photo Release I agree to grant to MH and its authorized representatives permission to record on photography film and/or video, pictures of my participation. I further agree that any or all of the material photographed may be used, in any form, as part of any future publications, brochure, or other printed materials used to promote MH, and further that such use shall be without payment of fees, royalties, special credit or other compensation.