



India Arts and Culture Council

<http://www.rasika.org>

MEMBERSHIP FORM

June 1, 2011 thru May 31, 2012

Name: _____ Date: _____

Email: _____

Phone: Daytime _____ Evenings _____

Address: _____

We have the following categories: RASIKA DONOR or RASIKA MEMBER or RASIKA SPONSOR
SPONSOR membership qualifies for Oregon Tax Credit. \$500 / \$1000 (enquire for details)

DONOR membership	Check One	All concerts are free. (PREMIUM Seating)
<i>Individual Donor – (admit one)</i>		\$125
Couple member with one child (up to 3)		\$200
Family Donor (up to 4) Add \$50 for additional family member.		\$250

Member: Admission to all events is free at the next level.

Membership		All concerts are free. (Regular seating)
<i>Individual Member</i> <i>(Cannot add additional adult or child)</i>		\$100

FAMILY MEMBERSHIP

Couple member)		\$150
Additional Family Child (< 15 years)		+\$25
Additional Family Adult		+\$50

rasika has 501(C) 3 status and all donations made to rasika are tax deductible.

Spouse name: _____

Child 1: _____ Age _____

Child 2: _____ Age _____ Child 3: _____ Age _____

Member's Parents' names: _____ & _____

Membership Amount \$ _____

Tax-deductible donation \$ _____

Total Amount paid \$ _____

Membership is non-refundable and non-transferable and valid for one year only for that season.

If your company matches contributions, please enter company's name: _____

For additional details contact rasikapdx@gmail.com Please send completed form and check payable to rasika to: Rasika, PO Box 91294, Portland, OR 97291