



San Jose Institute of Contemporary Art

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Membership Application Form

Please print out, complete, and fax back to (408) 283-8157

Yes! Please sign me on as a

- ☐ New
☐ Returning Member of the San Jose ICA

Name _____

Address _____

City/State/Zip _____

Evening Phone _____ Day Phone _____

Email _____

Please select from the following membership categories:

- ☐ Entrepreneur \$35
☐ Partner \$60
☐ Investor \$120
☐ Underwriter \$250
☐ Founder \$500
☐ Contemporary Collectors Circle \$1,000

Please charge my: ☐ Visa ☐ Mastercard ☐ American Express

Account # _____ Expiration Date _____

Signature _____

- ☐ Contact my company for its matching gift program

Company Name _____ City _____

- ☐ I am interested in volunteering at the ICA

Thank you for joining the San Jose Institute of Contemporary Art!