

Membership Application Form 2024

Membership Rates

Membership Level	One Year	Two Years
Student*	O \$40 + HST= \$45.20	O \$72 + HST= \$81.36
Individual	O \$66 + HST= \$74.58	O \$119 + HST= \$134.47
Artist	O \$53 + HST= \$59.89	O \$95 + HST= \$107.35
Family**	O \$98 + HST= \$110.74	O \$176 + HST= \$198.88

^{*} Full-time secondary and post-secondary students with valid photo ID

es, I would like to make a	donation to	the Varley Art	Gallery of M	arkham in the amount of:	
O \$25	○ \$50	C	\$100	O Other: \$	
Method of Payment					
CashCheque (made payalCredit Card (VISA/Max					
For security purposes, plea	se contact the	Gallery at 905-4	477-7000 ext. 3	263 to process credit card payment.	
Member Information					
Name					
Address					
Phone	Home: ()		Cell: ()	
Email					
				vent updates from the Varley Art m. I may unsubscribe at any time.	
Signature:	Date:				
				orting the future of arts in Markham. mailed to you within 2 – 4 weeks.	
For Office Use Only					
Membership Number:	New Expiry Date:				



^{** 2} adults and up to 4 children under 18 years of age