

The Guild of Florida Grand Opera - Membership Form 2009-2010 Season

Dual Annual Membership * \$100.00

*Two people at the same address

Single Annual Membership \$ 75.00

Your contribution is tax deductible within the limits of the law

FGO Patron #

Name (Please Print)

Second members name (if Dual Membership)

Street Address Apt. #

City State Zip

Daytime phone

Evening phone

email address

Payment Information

Please charge \$_____ to my credit card:

American Express MasterCard Visa Discover

Card # _____ Expiration Date: _____

Signature _____

Enclosed is my check for \$ _____ Payable to Florida Grand Opera _____

We would love to get you more involved! Select any areas you wish to volunteer for below:

Membership Mailing Committee Special Events Telephone Committee

Consider me for a Board member

Please mail to:

Rosa Rita Gonzalez - GUILD Membership

230 174th Street #1508

Sunny Isles Beach FL 33160

Submitted by _____ (M2005)

[BACK TO HOME](#)

A COPY OF THE OFFICIAL REGISTRATION AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING TOLL-FREE (800-435-7352) WITHIN THE STATE. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL OR RECOMMENDATION BY THE STATE . STATE OF FLORIDA SOLICITATION #CH3662.FLORIDA GRAND OPERA RETAINS 100% OF YOUR CONTRIBUTION.