



Corporate Leadership Circle

Enrollment Form

Company Name: _____
(as it should appear on recognition panels and membership listings)

Contact Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Business Phone: _____ Fax: _____

E-mail: _____

Levels (please note desired membership level):

- Patron (\$2,500 - \$4,999)
- Director (\$5,000 - \$9,999)
- Executive (\$10,000 - \$24,999)
- Chairman (\$25,000+)

Amount: \$ _____

Method of Payment

- A check, made payable to The Mint Museum, is enclosed
- Please charge our corporate credit card

Visa/MasterCard: _____ Card Number: _____

Expiration Date: _____ Security Code: _____

- Please contact our company to discuss a gift of stock

Mail contribution to:

Corporate Leadership Circle, c/o May Chrisman
The Mint Museum at *Levine Center for the Arts*
500 S. Tryon Street
Charlotte, North Carolina 28202

*For questions or additional information, please phone the development office at 704.337.2010.
Thank you for your generous support!*