

Join The Friends of CALS
Gift Membership Form

GIFT MEMBERSHIP FORM

To purchase a gift membership “Friend of CALS” please complete this form and mail it to:

Creative Arts League of Sacramento
6 Latham Lane
Sacramento, CA 95864

Or fax to: 916-488-3281

Enter the information for the person ~ *Receiving* ~ the membership.

FIRST NAME
LAST NAME
MAILING ADDRESS
CITY
COUNTY
STATE
ZIP
PHONE
FAX
EMAIL

Enter the information for the person ~ *Paying* ~ for the membership.

FIRST NAME
LAST NAME
MAILING ADDRESS
CITY
COUNTY
STATE
ZIP
PHONE
FAX
EMAIL

MEMBERSHIP TERM – June 1 through May 30

1 YEAR \$35