



membership pricing

The Art Gallery of Nova Scotia is pleased to offer special membership pricing for Fusion Halifax Members.

Benefits of Membership:

- FREE ADMISSION to exhibitions and family events
- Updates on all news and activities
- Invitations to exhibition openings
- Subscription to the AGNS Journal
- 10% members discount at the Gallery Shop
- Rental privileges with Art Sales & Rental

Membership rates and structures for Fusion Members:

Existing Structure:

Individual	\$50
Family/Dual (and children under 19).....	\$75

Fusion Structure:

Fusion Individual	\$40
Fusion Family/Dual	\$55

E- Memberships - less money - updates and invitations by email only - no mailings (the enviro-choice!)

Existing Structure:

E-Individual Membership	\$45
E-Family/Dual Membership	\$65

Fusion Structure:

Fusion E-Individual	\$35
Fusion E-Family/Dual.....	\$50

Click here for a **Printable Membership Form**.

Or if you prefer, you can click here and go directly to the online **AGNS membership form**. Please leave a note in the comment field specifying that you are a member of Fusion Halifax.

Membership Form



Art Gallery of Nova Scotia

For Members of *Fusion Halifax*

CHOOSE YOUR MEMBERSHIP LEVEL

Full memberships *includes mailing*

- Fusion Individual.....\$40
- Fusion Family/Dual (and children under 19).....\$55

E-Memberships *no mailing*

- Fusion E-Individual.....\$35
- Fusion E-Family/Dual (and children under 19).....\$50

CONTACT INFORMATION PLEASE PRINT

Organization Name *if applicable*: _____ Title: Mr. Miss Mrs. Dr. Other _____

First Name: _____ Last Name: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Telephone: () _____ Email: _____

2nd Card Recipient for families and couple/dual memberships *(must be same address as above)*:

Title: _____ First Name: _____ Last Name: _____

Family Membership, List First and Last Names and Age of dependant children *(under 19, living at home)*:

_____	_____	_____	_____
<i>First and Last Name</i>	<i>Age</i>	<i>First and Last Name</i>	<i>Age</i>
_____	_____	_____	_____
<i>First and Last Name</i>	<i>Age</i>	<i>First and Last Name</i>	<i>Age</i>

METHOD OF PAYMENT

Cash Cheque *(payable to the Art Gallery of Nova Scotia)* Credit Card: Type _____ #: _____

Expiry Date: _____ Name of Cardholder: _____ Signature: _____

YES! I would like to make an Additional Donation of \$ _____

TOTAL: _____

Thank you for supporting *your* Art Gallery of Nova Scotia!

Mail or drop off this form at our Information Desk:

Attn: Membership Coordinator, Art Gallery of Nova Scotia, PO Box 2262, 1723 Hollis Street, Halifax, Nova Scotia, Canada, B3J 3C8