



CENTRAL ARIZONA MUSEUM ASSOCIATION
DEDICATED TO THE FUTURE OF MUSEUMS

www.azcama.org

CAMA Membership Form 2021–2022

Membership to CAMA is open to individuals and institutions within Gila, Maricopa, Pinal and Yavapai Counties.
Membership year is September 1 – August 31

Institutional Membership *‡ \$100 Limited to institutions open to the public.	Museum Support Organizations (MSO) Membership *‡ \$100	Individual Membership \$25 ‡ Student with ID \$10 ‡ Available to students, volunteers and professionals interested in museums.
Institutional Member Benefits: <ul style="list-style-type: none"> • Institution listed on CAMA website • Monthly meeting notices for all CAMA meetings • Certificate of membership (upon request) • Scholarship opportunities to attend Museum conferences • Participation in special museum promotions and marketing campaigns • Opportunities to host CAMA meetings 	Museum Support Member Benefits: <ul style="list-style-type: none"> • Institution listed on CAMA website • Monthly meeting notices for all CAMA meetings • Certificate of membership (upon request) • Opportunities to host CAMA meetings 	Individual or Student Member Benefits: <ul style="list-style-type: none"> • Monthly meeting notices for all CAMA meetings • Certificate of membership (upon request) • Scholarship opportunities to attend museum conferences • Networking opportunities with museum professionals

* This membership year (2021–2022) includes a listing in the online CAMA brochure

‡ For this membership year, if you have been financially impacted due to COVID-19, please pay as you are able. Contact Membership for more details.

Institution: _____

Contact Name and Title: _____

Contact Email: _____ **Contact Phone:** _____

Mailing Address: _____

Physical Address (if different): _____

Main Phone: _____ **Main Email:** _____

Website: _____ **Director:** _____

YES, contact me by phone for credit card payment using secure Square Reader

YES, I will bring credit card to the next CAMA meeting to pay by secure Square Reader

YES, check payment enclosed

Membership‡ (check one or write in your donation amount)

Individual (\$25.00) _____

Student with ID (\$10.00) _____

MSO (\$100.00) _____

Institution (\$100.00) _____

Donation _____

**Please make checks payable to:
CAMA**

**Please mail to: PO Box 63062
Phoenix, AZ 85082-3062**