

2026 SUPPORTING MEMBERSHIP FORM

Please select your membership category:

Supporting Individual (\$50) Supporting Business (\$100)

Supporting Family (\$75) Supporting Corporation (\$250)

Please complete all applicable information:

Unrestricted Gift

Memorial/Honorary Gift (Circle one and list the name in memoriam/honor of):

Restricted Gift (Please list what gift is for): _____

In-Kind Donation of: _____

My Company Will Match My Contribution (Please Contact Me)

TOTAL CONTRIBUTION: \$ _____

Please make your check payable to KGAC and mail to:

Kentucky Guild of Artists and Craftsmen

137 N. Broadway

Berea, KY 40403

Please complete the following:

Name: _____

Business Name: _____

Address: _____

City: _____ State: _____ Zip: _____ County: _____

Business Phone Number: _____ Cellphone Number: _____

Email: _____ Website: _____

KGAC dues run from January 1 to December 31.

THANK YOU FOR YOUR CONTINUED SUPPORT!