



# Membership Application Form

Please complete this form and return it to the GAI Office at:

**Germanic-American Institute**  
301 Summit Avenue  
Saint Paul, MN 55102  
office@gai-mn.org  
Fax: 651-222-6295

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Partner Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Primary Phone: \_\_\_\_\_

Primary Phone Type:  Home  Cell  Work

Secondary Phone: \_\_\_\_\_

Secondary Phone Type:  Home  Cell  Work

Email Address: \_\_\_\_\_

Would you like to receive the newsletter via:

Postal Mail  Email (\$5 savings)

What is your household's knowledge of German?

Native speaker  Fluent non-native  Intermediate  
 Basic survival  None

Number of adults and children in your household:

\_\_\_\_\_ Adults \_\_\_\_\_ Children

Please check all age groups in your household:

0-4  5-9  10-14  15-19  
 20-35  36-49  50-59  60+

## DESIRED MEMBERSHIP LEVEL:

(Please select one membership level)

- Individual: \$35
- Household: \$65
- Senior: \$30
- Full-time Student: \$20
- Contributing: \$100 (two \$15 vouchers)
- Supporting: \$250 (two \$25 vouchers)
- Patron: \$1,000 (two \$50 vouchers)

Membership amount: \_\_\_\_\_

Donation: \_\_\_\_\_

Subtotal: \_\_\_\_\_

-\$5 (if email newsletter)

**TOTAL ENCLOSED\*:** \_\_\_\_\_

## PAYMENT METHOD:

- Check (Payable to "GAI" or "Germanic-American Institute")
- VISA  MasterCard  Discover

(Sorry, we are unable to take American Express at this time)

## Please make this a recurring charge:

- Monthly  Quarterly  Yearly

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Security code: \_\_\_\_\_

Signature: \_\_\_\_\_

Please note: The information you provide us will NOT be sold or shared with any other organization.

\*Memberships and donations minus the value of any goods or services received are tax-deductible and are used to support a variety of GAI programs.