

INSTITUTE OF HISPANIC CULTURE OF HOUSTON (IHCH)

3315 Sul Ross St., Houston, TX 77098

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MEMBERSHIP APPLICATION 2018: CONTACT INFORMATION

Name _____ Country of Origin _____

Name of Spouse _____ Country of Origin _____

Residence Address _____

City: _____ State: _____ Zip Code: _____

Cell: _____ Home Ph. _____

Work Ph (optional): _____ E-mail _____

MEMBERSHIP LEVEL: Membership Category/Annual Dues/Benefits valid for 1 year. Must show current card. Note: *does not include Gala tickets.

- () **Student** \$15 for one (1) student*
- () **Individual.** \$50 for one (1) person *
- () **Family** \$100 for two (2) adults and two (2) children.*
- () **Patron** \$150* (your name/logo in one event of your choice on IHCH site)
- () **Sponsor** \$500* (your name/logo in cultural events of your choice on IHCH site)
- () **Benefactor** \$2,000 (2 Gala Tickets; One scholarship given in your name)
- () **Underwriter** \$5,000 (4 Gala tickets; Two scholarships given in your name)

I am paying my dues with: () **check** payable to Institute of Hispanic Culture, sent to address above, () **Pay Pal** at www.ihch.org

Please consider participating in the 2018 volunteer activities: Choose two (2) Committees maximum:

- () **Scholarship Committee** () **Membership Committee** () **Nominating Committee**
- () **Cultural Committee** () **Public Relations** () **Building and Upkeep Committee**
- () **Folkloric Festival** () **Gala Committee** () **Performing Arts**
- () **Finance Council** () **Social/ Special Activities** () **Community Service**