



CIRCLE of Friends
2022- 2023 Membership
Membership Form

General Information: (please print clearly)

Member(s) Name: Mr. / Mrs. / Miss / Ms.

Address:

City:

State:

Zip Code:

Email Address:

Home Phone: _____

Mobile Phone: _____

Payment Method: _____ Check (payable to: Friends of the Historic Seminole Theatre)
_____ MasterCard _____ Visa _____ AmEx

Cardholder's name

Card Number

Expiration Date

CVC Code

Signature

May we identify you as a donor in our publications? _____ YES _____ NO

Name as you would like it listed.

The "CIRCLE of Friends" Membership program is an annual program.
Donations are tax deductible to the extent provided by the law

Any questions please Call: 786-650-2072

Please return completed form to:

Seminole Cultural Arts Theatre, Inc.

PO Box 1308, Homestead, FL 33090-1308

or Visit our website at:

www.friendsofthehistoricseminoletheatre.com