

★ Council of American Jewish Museums

Institutional Membership Application

CAJM INSTITUTIONAL MEMBERS RECEIVE ORGANIZATIONAL COMMUNICATIONS AND ARE FEATURED ON THE CAJM WEBSITE. INSTITUTIONAL REPRESENTATIVES ARE GRANTED ACCESS TO MEMBERS-ONLY SECTIONS OF THE WEBSITE, MAY ATTEND CAJM CONFERENCES AND SPECIAL EVENTS, PARTICIPATE IN MEMBERSHIP MEETINGS, CONTINUING EDUCATION PROGRAMS AND COOPERATIVE PROJECTS, MAY POST ANNOUNCEMENTS OF INTEREST TO THE FIELD THROUGH CAJM COMMUNICATION MEDIA, AND ARE ELIGIBLE TO VOTE (ONE VOTE PER INSTITUTION) AND TO HOLD OFFICE.

Institution:
Address:
Telephone:
Website:

Contact Name:
City, State Zip:
Fax:
Contact E-mail:

Institutional Data:

Year founded:

Square footage of exhibition space:

Annual attendance:

Annual budget: \$

of paid staff:

of volunteers:

Types of Programs Sponsored By Your Institution:

- Permanent exhibitions Changing exhibitions Seminars and workshops
 Lectures Performing arts events School programs
 Films Other _____

If applicable, number of changing exhibits per year:

If applicable, three highlights of your collection (i.e., objects):

Other organizational memberships:

Contacts:

Please list up to six key staff members (where applicable), beginning with the primary contact who will receive ALL CAJM communications. Additional staff and the chair person will receive select print and e-mail communications.

Name	Title	E-mail:
1.		
2.		
3.		
4.		
5.		
6.		

Board Chair:

Term ends:

Mailing address:

E-mail:

MEMBERSHIP LEVELS:

Institutional Budget below \$300,000

DUES:

\$250

Institutional Budget \$300,000-\$749,999

\$500

Institutional Budget \$750,000-\$1.49 M

\$750

Institutional Budget \$1.5 M and above

\$1,000

**AMOUNT ENCLOSED,
PAYABLE TO CAJM:**

(Circle) AE / MC / Visa Name on card _____ # _____ Exp. Date _____

Please complete credit card information or mail check and form to:

Council of American Jewish Museums, P.O. Box 12025, Jackson, MS 39236-2025, Fax (601) 366-6293