



Irish American Cultural Institute National & Rochester Chapter Membership Form

As a National Member, you will receive Éire-Ireland (print & electronic version), our informative e-newsletter, **Our newest benefit - Complimentary access to our monthly virtual programs**, notice of IACI events and other Irish activities. Your enrollment includes membership in the Rochester Chapter of the IACI.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-Mail: _____

Payment Information:

Total Membership Cost (\$40): \$ _____

Please accept the following tax free donation in addition to my Membership: \$ _____

Total Amount Enclosed/to be charged: \$ _____ Check (Payable to IACI)

___ Visa ___ MasterCard ___ AmEx ___ Discover

Card Number: _____

Expiration: _____ CSC Code (back of card): _____

Signature: _____

Prefer to pay online? Please visit <http://www.iaci-usa.org/rochestermembership.html>

Please return to: Carol Buck/IACI · PO Box 1130 · Margaretville · NY · 12455

Questions? Phone: (973) 605-1991 · E-Mail: info@iaci-usa.org

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