

## 35th Season — HELICON MEMBERSHIP FORM — 2019-2020

For Helicon Membership, kindly complete this form  
and return it with your tax-deductible contribution to:  
**The Helicon Foundation, Inc., 300 Park Avenue, Fl. 12, New York, NY 10022**

### HELICON SYMPOSIUMS

Sunday evenings at 5:00 • Monday evenings at 7:00 • 15 East 65th Street.

Symposium 131 – ROBERT & CLARA – 10 & 11 November 2019  
Symposium 132 – NORTHERN LIGHTS – SCANDINAVIAN ROMANTICS – 15 & 16 December 2019  
Symposium 133 – QUINTESSENTIAL II – 23 & 24 February 2020  
Symposium 134 – CONCERTS AVEC PLUSIEURS INSTRUMENTS – 10 & 11 May 2020

I would like to subscribe to Helicon's

**Sunday Series**       **Monday Series**

with a tax-deductible contribution supporting the foundation's work.

Single Membership

\$400-\$599

Member

\$600-\$749

Contributing Member

\$750-\$999

Sustaining Member

\$1,000-\$1,499

Sponsoring Member

\$1,500-\$2,499

Directors' Circle

\$2,500-\$4,999

Helicon Society

\$5,000

- Enclosed is my contribution by check/credit card payable to **The Helicon Foundation, Inc.** in the amount of \$ \_\_\_\_\_.
- I enclose partial payment of \$ \_\_\_\_\_ now, and will send the balance by \_\_\_\_\_ (date).
- I do not wish to become a member, but will support Helicon's work with a tax-deductible gift of \$ \_\_\_\_\_.

\_\_\_\_\_  
Name as you wish it to appear on Helicon materials.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Credit Card Numer (add name if different)

\_\_\_\_\_  
Exp. date

\_\_\_\_\_  
CVC (3 or 4 digits)

\_\_\_\_\_  
Telephone number(s)

\_\_\_\_\_  
Email(s)

*Send membership contributions to:*

**The Helicon Foundation, Inc.**  
300 Park Avenue, Fl. 12  
New York, NY 10022