

MEMBERSHIP APPLICATION

Name: _____

Address: _____

City, State, ZIP: _____

Telephone: _____ **E-Mail:** _____
Day Evening

Occupation: _____ **Employer:** _____

MEMBERSHIP TYPES (please select one)

- Active \$125
- Investor \$250
- Sponsor \$500
- Visionary \$1,000
- Family Membership \$150
- Student (under 21) \$75 Birth Date _____
- Senior (over 65) \$85 Birth Date _____

Which volunteer activities would interest you? (Check all that apply):

- Gallery Receptions Fundraising
- Gallery (*staffing, sales, hanging*) Pacific Prints
- Office (*answering phones, sales, registration*) Committee Work
- Special Events (*Fundraisers, Dinners, Annual Party*) Grant Writing
- Newsletter (*mailings, press releases, story writing*)
- Marketing Committee (*deliver materials, hang promos, fax/mail/archive media*)

What is the best time for you to volunteer? Day Evening Weekend

Member Signature

Date

Thank you for your interest. We will be contacting you soon!