

WICKENBURG ART CLUB
Membership Form

NAME _____
Last First MI

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ CELL PHONE _____

EMAIL _____

ART MEDIA (List each) _____

How did you hear about us? _____

I am a Juried member of Arizona Art Alliance []

VOLUNTEERS: Years of hard work by our members have made the Art Club what it is today. Please let us know in what areas you may like to participate. Areas might be program planning, accounting, event sitting, refreshments, editing, building or yard maintenance, youth education, publicity, photography, computers, demonstrating art, setting up displays, preparing exhibits, record keeping, or any other skill you may possess.

I am interested in volunteering to:

ANNUAL MEMBERSHIP

Adult \$20, Student \$5
After July 1st a new "adult membership" is half price

TAX DEDUCTABLE DONATION _____

TOTAL ENCLOSED \$ _____

Return form and check payable to WAC to: Wickenburg Art Club
Attn: Membership Chairperson
PO Box 1737
Wickenburg, AZ 85358

+++++Club Use+++++
Date _____ Receipt ___ Member CD ___ Member File ___ Newsletter ___ Badge ___ Directory ___
Hold Harmless ___ Welcome Letter ___