

Membership Application
SAN CLEMENTE ART ASSOCIATION
P.O. BOX 227
SAN CLEMENTE, CA 92674
949-492-7175

Membership Dues are \$60.00 each fiscal year

Application for the period June 16, 2019 through June 15, 2020

(Dues for each additional person living at the same address that wishes to be a member is \$10)

Renewal is June 16th of every year

Please PRINT. This questionnaire must be completed in order to process membership.

NAME _____ PHONE _____ EMAIL _____

ADDRESS _____ CITY & STATE _____ ZIP _____

(A MINOR APPLYING FOR MEMBERSHIP (UNDER 18) MUST BE SPONSORED BY A PARENT OR GUARDIAN WHO IS A SAN CLEMENTE ART ASSOCIATION MEMBER).

WHAT ARE YOUR ART INTERESTS?

___ Oils ___ Acrylic ___ Watercolor ___ Pastels ___ Sculpture ___ Photography/Graphic Arts
___ Mixed Media ___ Plein Air ___ Crafts ___ Jewelry ___ Other _____

PLEASE CONSIDER VOLUNTEERING IN SOME CAPACITY. IT IS REWARDING AND A GREAT WAY TO MEET MEMBERS.

Where would you be willing to serve?

- | | |
|---|---|
| <input type="checkbox"/> Art/Craft Fair | <input type="checkbox"/> Military Artist Program (MAP) |
| <input type="checkbox"/> Paint San Clemente | <input type="checkbox"/> Refreshments for Receptions & Meetings |
| <input type="checkbox"/> Decorating for Receptions | <input type="checkbox"/> Publicity |
| <input type="checkbox"/> Graphic Design | <input type="checkbox"/> Show Registration |
| <input type="checkbox"/> Website Management | <input type="checkbox"/> Distributing Posters |
| <input type="checkbox"/> Telephoning Members regarding upcoming events | <input type="checkbox"/> Data Entry at Shows/Word Processing |
| <input type="checkbox"/> Monthly Membership Meeting "Management Team"
Set up refreshments, make coffee, clean-up | <input type="checkbox"/> Membership Records – Includes:
Mail pick up, renewal and new member application processing, membership record keeping and correspondence. |
| <input type="checkbox"/> Executive Board Member/Standing Committee Chair | <input type="checkbox"/> Gallery Sit to cover vacant positions |
| <input type="checkbox"/> Student Scholarship Liaison / Coordinator | |

Additionally, all members are expected to sit in the gallery during a shift for every piece of artwork they enter in a show.

We welcome your comments: _____

Signature _____ Date _____

PLEASE RETURN THIS COMPLETED FORM ALONG WITH MEMBERSHIP DUES

THANK YOU!