

2011 MEMBERSHIP FORM

Name _____

Address _____

City/State _____ Zip _____

Email Address _____ Phone# _____

Medium/Media _____

WHAT CAN YOU DO TO HELP?

Board Position _____

Newsletter creation _____

Mailings _____

Telephone Tree _____

Host/Hostess Meetings _____

Starving Artist Art Fair _____

Art2 Event _____

Annual Project _____

Volunteer for art show drop-offs and pick-ups _____

Other _____

WE WANT YOUR SUGGESTIONS FOR:

Trips _____

Programs _____

Workshops _____

Membership dues are \$25.00 for individuals, \$35.00 for couples.

Please submit this form and your payment by December 15.

Make checks payable to Racine Art Guild, and mail to
Racine Art Guild, PO Box #1345, Racine, WI 53401.

Cash _____

Check # _____

