



MEMBERSHIP APPLICATION

September 2011 – September 2012

www.WeymouthArtAssn.org

NAME: _____ DATE: _____

ADDRESS: _____ ZIP: _____

TELEPHONE: _____ EMAIL: _____

WEBSITE: _____ MEDIUM _____

Please check off the programs you wish to participate in:

- | |
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| <p><input type="radio"/> AROUND TOWN – The opportunity to show your work at select local businesses.</p> <p><input type="radio"/> ARTIST OF MONTH – Display your work in a solo show at the Tufts Library for 1 month out of the year.</p> |
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Please check off the appropriate category, make check payable to Weymouth Art Association, and mail it to the address listed below. We look forward to seeing you at the upcoming shows and meetings!

- High School Student - \$5.00
- Senior Citizen - \$18.00
- Regular / Artist - \$23.00
- Family - \$28.00

<p>WEYMOUTH ART ASSOCIATION P.O. BOX 890250 WEYMOUTH, MA 02189</p>
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