

Membership Application/ Renewal Form



The Essex Art Association welcomes your dues and donations. Of equal value is the support you exhibit by volunteering. Thank you in advance!

Name _____

Address _____

City _____ **State** _____ **Zip code** _____

Email _____ **Phone ()** _____

Your website address _____

Please select the appropriate category:

- | | |
|---|---|
| <input type="checkbox"/> \$35 (Supporting Member) | <input type="checkbox"/> \$50 (Elected Artist Member) |
| <input type="checkbox"/> \$40 (Associate Artist Member) | <input type="checkbox"/> \$500 (Lifetime Elected Artist Member) |

My additional donation:

- | | |
|--|---|
| <input type="checkbox"/> Friend \$1-\$99 | <input type="checkbox"/> Benefactor \$500-\$999 |
| <input type="checkbox"/> Donor \$100-\$499 | <input type="checkbox"/> Patron \$1000+ |

I will support by volunteering for the following:

- | | |
|--|--|
| <input type="checkbox"/> Chairing an art show | <input type="checkbox"/> Bringing refreshments for a show |
| <input type="checkbox"/> Bringing flowers to a show | <input type="checkbox"/> Helping with seasonal cleanup/prep |
| <input type="checkbox"/> Gallery sitting during a show | <input type="checkbox"/> Distributing show posters and invitations |
| <input type="checkbox"/> Hanging artwork for a show | <input type="checkbox"/> Helping during drop-off/pick-up days |

*Please mail this completed form, along with your membership dues/donation
(check made payable to Essex Art Association) to:*

Essex Art Association, P.O. Box 193, Essex, CT 06426