

## **Annual Membership Application**

Name:	Date:			
Mailing Address:				
City:	State:	Zip Co	ode:	
Home Phone:	Cell Pl	hone:		
Email:				
Preferred Contact Method (Circle	one):	Phone	Email	
Additional Comments:				
Would you be interested in volunteer	r opportuni	ties at the EAP	?: Yes	No
Would you like to receive exhibition	postcards t	through the ma	il?: Yes	No
Individual \$50 Benefits: 20% off of submission and a "Members Only" Exhibition in July, an statement, resume, and up to 3 photo Family *up to 4 members at the same mai Same as Individual Benefits.  Student / Military *with valid ID \$25 Same as Individual benefits  Associate \$100 Includes Individual benefits, a link to Partnership's website, and up to two mailing audience.	nd a section ograph exc iling address your webs	in in the EAP Me amples of artwo \$75	ember Binder f ork. ndido Arts	or artist
Professional \$250 Includes Associate benefits, a hosted website including your artist's statem updates per year.				-