



Membership Application

Name: _____ Date: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____

Email: _____

Instagram: _____

Additional Comments: _____

Would you be interested in volunteer opportunities at the EAP? Yes No

Would you like to receive exhibition postcards through the mail? Yes No

Please circle desired Membership Level

Individual \$50

Benefits: 20% off of submission and event rental fees, an admission in the annual "Members Only" Exhibition in July, and a section in the EAP Member's Binder for artist statement, resume, and up to 3 photograph examples of artwork.

Family *up to 4 members at the same mailing address \$75

Same as Individual Benefits.

Student / Military *with valid ID \$25

Same as Individual benefits.

Associate \$100

Includes Individual benefits, a link to your website on the Escondido Arts Partnership's website, and up to two e-blast announcements with access to our online mailing audience.

*Thank you for contributing to our Mission of strengthening and enriching
our community as a cultural destination through the power of the arts!*