

# Membership Application



*The Quabbin Art Association provides education, support, and opportunity for local artists, and promotes community interest and appreciation in the visual arts.*

New Member \_\_\_\_ Renewing Member \_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Website \_\_\_\_\_

## *Your Media:*

Acrylic ____	Collage ____	Oil ____	Photography ____
Calligraphy ____	Graphics ____	Pastel ____	Sculpture ____
Ceramics/ Pottery ____	Jewelry ____	Pen/Ink ____	Textile ____
Charcoal ____	Multimedia ____	Pencil ____	Watercolor ____
Other _____			

*Volunteer!* Please check the ways you can help.

Marketing \_\_\_\_  
Publicity \_\_\_\_  
Exhibits \_\_\_\_  
Hospitality \_\_\_\_  
Programs/Demonstrations for meeting \_\_\_\_  
Membership \_\_\_\_  
Website \_\_\_\_  
Plein Air Coordinator \_\_\_\_  
Other ways I can help \_\_\_\_\_

**Membership:** Membership runs from September 1<sup>st</sup> to August 31<sup>st</sup>.

**Individual: \$25**

*Make check payable to:* Quabbin Art Association

*Mail to:* P.O. Box 216, Belchertown, MA 01007

*Signature:* \_\_\_\_\_

*Date:* \_\_\_\_\_

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**For membership chairperson's use only:**

Date rec'd \_\_\_\_\_ Cash \_\_\_\_\_ Check \_\_\_\_\_