

Art for Madisonville

Membership Application

Name _____

Address _____

City, State & Zip _____

Telephone # _____ Cell Phone _____

Email _____

___ I am an artist. My medium is _____

___ I am not an artist, but I have a particular interest in _____

___ I am interested in serving on the following committee/committees:

Art Exhibit___ Workshop___ Hospitality___ Publicity ___

___ I am interested in demonstrations or workshops on the following topics:

Membership Level: New _____ Renewal _____

Youth (under 18) \$15.00 _____ Individual \$25.00 _____

Family \$35.00 _____ Business \$65.00 _____

Please make check payable to Art for Madisonville and mail to:

Art for Madisonville
P.O. Box 1271
Madisonville, LA 70447