

ARTIST TYPE MEMBERSHIP APPLICATION

TYPE OF MEMBERSHIP

Practicing Artist Practicing Artist – Lifetime Associate of Artist Student

Applicant Name			
Mailing Address			
City, ST ZIP			
Telephone		Mobile Phone	
Email Address			
Date		Signature	

BACKGROUND INFORMATION

TITLE OF WORKS SUBMITTED FOR JURYING

1.	2.
3.	<i>Three classic, representational works must be submitted if applying for Practicing Artist or Practicing Artist – Lifetime Member</i>

PRACTICING ARTIST MEMBER SPONSORS (2 required)

Practicing Artist Signature	Practicing Artist Signature
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FOR EXECUTIVE BOARD USE ONLY
JURY OF ACCEPTANCE:

1.	2.
Date of Acceptance:	

