

**PATRON TYPE MEMBERSHIP APPLICATION**

**TYPE OF MEMBERSHIP**

Patron     Patron - Lifetime     Associate Patron     Corporate

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

**BACKGROUND INFORMATION**

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**MEMBER SPONSOR SIGNATURES**

Practicing Artist Signature (1 required)	Practicing Artist or Patron Signature
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**FOR EXECUTIVE BOARD USE ONLY**  
**JURY OF ACCEPTANCE:**

1.	2.
Date of Acceptance:	