



Membership Form

Membership Year is January through December

Annual Dues:

\$40 Individual

\$50 Family Of 2 Or More

Students Under 18 Are Free

PLEASE PRINT CLEARLY:

NEW MEMBER RENEWING MEMBER

NAME: _____

ADDRESS: _____

CITY: _____ ST: _____ ZIP: _____

ALTERNATE ADDRESS: _____

(If not a full-time local resident)

CITY: _____ ST: _____ ZIP: _____

MONTHS AT THIS ADDRESS: _____

EMAIL ADDRESS: _____

(Required to receive Brush Strokes by email)

WEBSITE ADDRESS: _____

(If you'd like it to be listed on the PAG Website)

HOME #: _____ CELL #: _____

BIRTHDAY _____ MONTH _____ DAY _____

Check any committees you are interested in:

- Education Workshops
- Hanging Demos
- Hospitality Newsletter
- Publicity Exhibits
- Scholarship Telephone

List any other skills/talents:

Tell us more:

- I am an artist. My primary medium is _____
- I am an Art Instructor/Teacher at _____
- I am a supporter of the Arts
- I would like to serve on the Board of Directors
- I would like to receive Brush Strokes Newsletter by email (included in your membership)
- I would like to receive Brush Strokes Newsletter by mail (additional \$10 per year)
- I am a student under age 18 (free membership)

**Please mail this form and your check payable to Plantation Art Guild by December 15th to:
Elizabeth Dodd, 11061 NW 5th Ct., Coral Springs, FL 33071**