

Office Use: Member #				
Date Payment Rec'd:				
Cash	Check	Credit		

## **MEMBERSHIP**

Please print clearly so we can add you to our database.				
Trease print crearry so we can add you to our database.	Annual Membership Fees			
Date:	(Please check one)  Individual: \$30			
Name:	Couple: \$50*			
Address:	*A separate membership form is required for each spouse.			
City: State: Zip:				
	Please check one:			
Phone: Email:	□ New Member			
Wahcita	☐ Renewing Member			
Website:	_			
	r gregitens die			
In what general category would you place your artwork and/or interest? C	Check all that apply.			
☐ Drawing ☐ Glass ☐ Jewelry ☐ Painting ☐ Photograp	phy Dottery Drintmaking			
□ Sculpture □ Supporter □ Textiles □ Woodworking □ Other:				
We are an all-volunteer organization. We need our members to help in a variety of ways to continue ALL's success. Please indicate ways that you might be willing to volunteer your talents. Check all that apply. Go to <a href="https://www.artleagueofleland.org">www.artleagueofleland.org</a> for descriptions of committee tasks and positions on the Board of Directors.				
☐ Serve as a board member/officer				
☐ Serve on a committee. Check all that apply.				
☐ Art Exhibition ☐ Communications ☐ Education ☐ Finance ☐ Fundraising (as needed)				
☐ Web Development & Maintenance				
☐ Demonstrate a specific artistic skill or share artwork at a meeting. Skill:				
Do you have experience with any of the following?  Board of Director	ors Budgeting/Accounting			
Computer Graphics Event Organization/Hospitality Juryin	g or Hanging an art show Legal			
Management Public Relations Website/Social Media   Writing/Editing   Workshop Leadershi				
Using Excel, PowerPoint or other program(s):				
How did you hear about ALL?				

Questions? Email us at: <a href="mailto:artleagueofleland@gmail.com">artleagueofleland@gmail.com</a>