



Women Sharing Art inc

Sharing Energy & Exploring Artistic Passions
a not-for-profit corporation

ASSOCIATE MEMBERSHIP Annual Application Form

Checklist

- Completed Application Form
- Payment

Thank You!

Thank you for your interest in becoming a supportive member of Women Sharing Art, Inc! See Benefits listed below that you will receive as an **Associate Member**. We appreciate your submission and look forward to your membership. If you have any questions regarding this application, please email us at info@womensharingart.org or call 516-840-3255.

Please fill out this application and mail it to the PO Box below. (An electronic application will be on the website at a later date.) You will need to submit the following items to the Membership Committee:

- **Application Form** - Print out, complete information and send to address listed at bottom of form.
- **Payment** - Check in amount of Membership chosen below, made payable to "Women Sharing Art, Inc." only to be deposited upon membership approval.

About You!

Name: _____

Home Phone: _____

Address: _____

Email: _____

Additional Info: _____

Your Associate Membership

CHOOSE ONE in this category

- Individual \$35
- Student/Senior \$30

CHOOSE ONE in this category

- New
- Gift
- Renewal

Your Annual Associate Benefits

 Based on one Calendar Year from the date of your acceptance.

- Exhibit Previews
- Invitations to Gala Openings
- Welcome to Attend Monthly Meetings featuring Guest Speakers and/or Artist Presentations. Meetings held Second Thursday of each month at 7:00pm. Locations to be announced.

Please tell us how you heard about Women Sharing Art?

- Friend
- Website
- One of Our Exhibitions

Other _____



womensharingart.org

PO Box 938
Bayport, NY 11705