

The Fine Arts Society of Milton

MEMBERSHIP APPLICATION

For the period covering January 1 to December 31

Please Print

NAME: _____

MAILING ADDRESS: _____
street city postal code

PHONE #: _____ E-MAIL : _____

WEB ADDRESS (if applicable): _____

TYPE OF MEMBERSHIP: New Member Renewal

Adult - \$40. Student (full time) - \$30. Senior (pension) - \$30. *Family - \$60. Associate \$40.
*associate is a patron/supporter

*Names of Additional Members for Family Membership (*must reside at above address*):

We have many events and opportunities for our members to meet with their peers, to increase their skill levels, to benefit from other artists' knowledge and experience and generally enhance their love of art. (We welcome non-artists to join FASM as well and participate in the "behind the scenes" activities.)

Please indicate which of the following you would be interested in taking part:

Art Shows Paint-ins Paint-outs Art Lectures
 Workshops Gallery Visits Open Studio Days Tours

Volunteering is an integral part of our organization, without which we could not exist and provide the many enjoyable events and activities. Please indicate the activities you can assist with:

Events and Shows Workshops Executive Position Youth Mentoring
 Public Relations Open Studio Days Social Gatherings Social Media
 Studio Tour Tasks Administrative Duties Other: Other:

Membership Agreement:

I agree to support the goals of The Fine Arts Society of Milton and to abide by the decisions made by the Board of Executives and General Membership. I acknowledge the membership period is from January to December 31st.

Signature: _____

Date: _____

Mail this form with payment to:
FASM P.O. Box 23067 Stn. Main, Milton, ON L9T 5B4
Etransfers accepted at fasminfo@gmail.com
Send completed forms to above.

Office Use Only:	<input type="checkbox"/> Card	<input type="checkbox"/> Welcome Letter	<input type="checkbox"/> Fee to Treasurer	<input type="checkbox"/> Database	
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