

SOUTH ARTS MEMBERSHIP APPLICATION

Membership through December 31st, 2010

Membership(s): Please Check:

Date: _____

_____ Individual: \$25.00

_____ Family: \$35.00

_____ Student or Senior: \$20.00

_____ Child Ages 3 – 5: \$12.00

Name: _____ Membership Fee(s): \$ _____

Address: _____ Optional Tax Deductible Donation
\$ _____

Provide best phone number for reaching you: (Enclose separate check)

Home phone: _____

Cell phone: _____

TOTAL: \$ _____

Work phone: _____

fax: _____

e-mail address: _____ ***Please include email if you have it!***

With the price of postage so high, we send as much information as we can through email.

Checks should be made payable to South Arts. Mail Checks to:

**SOUTH ARTS MEMBERSHIP:
c/o Leslie Baldwin
407 Countryside Drive
McKees Rocks, PA 15136**

phone: (412) 788-0525

cell phone: (412) 720-7380

email: lesbld@msn.com

CHECK AREAS OF INTEREST: All members must help with at least one aspect of SOUTH ARTS

Building Maintenance _____

History _____

Calling _____

Hospitality _____

Classes _____

Membership _____

Exhibitions in Building _____

Newsletter _____

Exhibits out of Building _____

Publicity _____

Extra Sitting Times _____

Rental of Building _____

Featured Artist _____

Community Outreach _____

Board Offices:

_____ Treasurer

_____ Secretary

_____ Grant Writing