



# MEMBERSHIP APPLICATION

P. O. BOX 655  
BROWNSVILLE, OR 97327

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Website: \_\_\_\_\_

Membership type (see membership descriptions below):  Friend/Supporter  Active

What type of art do you create (check all that apply)?

- Paintings  Jewelry  Drawings  Photography  Fiber Arts  Sculpture  Ceramics
- Other \_\_\_\_\_ Medium \_\_\_\_\_

Do not create art but support the arts

Would you describe yourself as:  Amateur Artist  Professional Artist  Patron of the Arts

What is your main interest or reason for wanting to become a member of the Brownsville Art Association? \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## **Membership Descriptions:**

### ***Friend/Supporter Membership***

- \* Receive emails regarding association meetings and events*
- \* May choose to attend meetings and Open Studios*
- \* Are encouraged to volunteer at the center but are not required to*
- \* May display their work at shows for a \$10 set up fee and work at least one shift during the show*

### ***Active Membership***

- \* Receive emails regarding association meetings and events*
- \* Attend meetings and Open Studio days*
- \* Volunteer time at the center (hosting events, cleaning, painting, setting up and taking down shows/events, do projects for the center that are needed, teach classes, etc.*
- \* May display their work in Open Studio, shows, and events*
- \* Actively assist in publicizing BAA*
- \* Serve as an elected member of the Board*