

Hopkinsville Art Guild Membership Form
Fiscal Year - July 1st through June 30th **Date Paid** _____

Name: _____

Address: _____
_____ City _____ State _____ Zip _____

Phone Home: _____ Work: _____ Cell: _____

Email address: _____

Membership type: (check one) Individual \$50 Family \$50 Student \$15

**Credit Card Payment available on Guild website for an additional \$2.00 per membership

Please make check payable to **Hopkinsville Art Guild**

Mail this Guild membership form and check to:
Hopkinsville Art Guild, PO Box 495, Hopkinsville, KY 42241

Membership Interest Survey

Please let us know how you want to be involved

- ___ Military Appreciation Activities
- ___ Adult/Youth Leadership Hopkinsville Painting Activity
- ___ Spring Member Exhibition and Contest at HCC
- ___ High School and Elementary Art student experiences
- ___ Art Exhibitions in community: rotating on a quarterly basis
 Jennie Stuart Medical Center, Chamber of Commerce, Municipal Center
 Pennyroyal Area Museum, The Mixer
- ___ Attend Art Skills development workshops (9 offered, on Saturday mornings)
- ___ Assist with Special Olympics and Wonderfully Made Workshop
- ___ Assist with free "*Crafting After Hours*" programs
- ___ Assist with free "*Midday with the Art Guild*" Luncheons, food, flowers, etc.
- ___ Sell your art on the Guild website
- ___ Help with Social Media and publicity
- ___ Scholarship and Grant Review committee member
- ___ Hospitality greeter for events

Other areas you would like to participate: _____

Suggestions for *Skills Development Workshop* or *Crafting after Hours* leaders
Name and contact information:
