Fallbrook Art Association Membership Application / Renewal

For period January 1 through December 31 Please PRINT all entries

*First Name	*Last Nam	ne
*Address		*Zip
Phone	*Email	Website
*Required information		
_	-	want published in our directory.
Please check type of r	nembersnip(s)	
Individual \$75		
Family \$95 (2 adults	and independant children und	der 21 living at the same address)
Student \$0 (no cha	rge for students)	
	\$200 (TAX DEDUCTIBLE)	***
		\$275 / Fam \$95 + Gallery \$200 = \$295
•	•	month for 10 months for a savings of \$100 \$200 Gallery Membership = \$100)
Patron (Min\$100) \$	3-Month	Membership \$10
Favorite Medium(s)		
Signatura		Date
Signature		Date
Please n	nake out check to: Fallbrook	Art Association
Mail to: F	AA, P.O. Box 382, Fallbrook,	CA 90288-0382
#GALLERY	VOLUNTEER SE	RVICE FALLBROOK
ALLESSES AT ASSOCIATION		ART ASSOCIATION
	Please check interests/ski	ills that apply
Gallery Sitter	Data Input IT	Accounting Publicity
A		
Art Programs	Workshops Fundrai	ising Events
	Workshops Fundrai ograms Audio-Visual <u>*</u>	•
Children's Pr	·	Handyman