

## **MEMBERSHIP FORM**

## **Please Print**

First Name	Last Name Date		Date	
Mailing Address		Cell Phone		
City, State, Zip Code		Email		
Would you conduct a demonstration at a LAG meeting? Y / N Topic:				
Would you teach a LAG class or workshop? Y / N Topic:				
Could you help Lacombe Art Guild thrive by helping with one of the following committees:				
MembershipPublicityHospitalityShowsMarket				
ANNUAL DUES - Please pay by January 31st to receive ALL member benefits. If joining after September 30th, dues are \$20 for an individual/\$35 for two adults at same address Membership year ends December 31 for all members				
Individual Membership - \$30				
Two Adults at the same address - \$50	Name 50 Cell Phone Email			
Additional Financial Support Opportunities for Lacombe Art Guild:				
Patron - \$100 / year Corporate Event Sponsor - \$25 / event				
Gold Patron - \$250 / year Gold Corporate Event Sponsor - \$500 / event				
To be completed by Lacombe Art Guild:				
Dues Paid:// Check Number:/ Cash \$ Received by:				

Rev ´	1/2023
-------	--------

You may mail this form with your payment to Lacombe Art Guild PO Box 1033 Lacombe, LA 70445