

Fallbrook Art Association Membership Application / Renewal

For period January 1 through December 31

Please PRINT all entries

First Name _____ Last Name _____

Address _____ City _____ Zip _____

Phone _____ Email _____ *Website _____

*Optional

Please circle any information above you DO NOT want published in our directory

Please check type of membership(s) you are applying/renewing:

Individual \$95

Family \$115 (2 adults and independant children under 21 living at the same address)

Student \$10

Gallery Membership \$200 each member (Tax Deductible)

(FAA Membership req'd: Ind \$95 + Gallery \$200 = \$295/ Fam \$115 + Gallery \$200 **each**)

Gallery Membership allows a member to enter 3 pieces per month for 10 months for a savings of \$100 (3 pieces X \$10 = \$30 per month X 10 months = \$300, less \$200 Gallery Membership = \$100)

Patron (Min \$100) \$ _____

Favorite Medium(s) _____

Signature _____ Date _____

I paid electronically online and I checked my membership choice above.

I am paying with a paper check and I checked my membership choice above.

Please make out check to: **Fallbrook Art Association**

Mail to: FAA, P.O. Box 382, Fallbrook, CA 92088-0382



VOLUNTEER SERVICE
PLEASE CONSIDER
TO HELP IN ANY WAY YOU CAN



Please check interests/skills that apply

Gallery Docent (sitting the gallery) IT Accounting Publicity

Art Programs Workshops Fundraising Events

Children's Programs Audio-Visual Handyman Instagram

Google Workspace (FORMS, DOCS, EBLASTS).

Other: _____

