Where creativity Meets community

Ebb Tide Gallery Application for Membership

Date:		
Applicant Name:		
Phone:		Cell Phone:
Email:		
		r:
Medium: _		
Product Prio	ce Range: \$ to \$	
Personal Re	eferences:	
1:		Phone #
2:		Phone #
	embership Requirements, Men before submitting your applic	mbership Contract, and Gallery Policies and cation.
Please subn		and, if available, your art resume to the above address
All contract acceptance.		(2) months with first and last months' rent being due on
	For	Gallery Use Only
	Accepted	Not Accepted
	Resume Included	Application Fee
	Check #	Member Starting Date: