

Membership Form

Yes, I want to be a member of the Indiana Art Association!

Enclosed is my yearly (June-May) membership fee of \$15.00. Family rate: \$30.00.

Send form(s) and check payable to: Indiana Art Association, c/o Bob Moore, 233 North Ninth Street, Indiana, PA 15701.

Name (Please print) _____ Date _____

Address _____

City, State, Zip _____

Email _____ Home phone/alternate phone _____

Check all that apply

Send my newsletter as an email attachment only (Word document) to save IAA funds.

Area(s) of interest:

oil painting; watercolor; acrylic; photography; mixed or other 2D _____

3D _____; Supporter _____

Yes, I want to help

Exhibits committee: give ideas; take in artwork; hang show; entry forms, tags, program; coordinate exhibit

Programs and classes committee

give ideas; coordinate; teach or demo; refreshment; phone call reminders; set up/clean up room

Education: give ideas; assist ArtsCamp; teach kids; teach art teachers; IAA library; ACT 48 paperwork

Publicity: Web publicity; newsletter mailing; newsletter writing/design; other

Fundraising committee: give ideas; crunch numbers; grants; patrons; memberships; fundraiser

Thank you!