
NAME

DATE

STREET ADDRESS

CITY

ZIP CODE

PHONE NUMBER

EMAIL ADDRESS

Areas of interest:

- Drawing Pottery
 Painting Teaching
 Photography Supporting the arts
 Sculpture Other

Offer to help with:

- Exhibits & sales Marketing/publicity
 Receptions Office/computer work
 Education Membership
 Maintenance Fundraising
 Newsletter Other

Membership level:

- Individual \$50 Family \$75 Donor \$100 Student* \$25 Corporate \$150+

** students must be high school or college students with a valid student ID, please photocopy and submit with form*

Method of payment:

Check # _____ payable to: Art Alliance

VISA / MC / DISCOVER

CARD #

EXP. DATE (MM/YYYY)

3 DIGIT CODE

CARDHOLDER SIGNATURE

Please mail this form to: Art Alliance of Central PA, P.O. Box 811, Lemont PA 16851