



Forks Area Art Society
Membership Application **Date**_____

Annual Membership Dues
Individual: \$20 for calendar year
Family: \$30 per calendar year

(Dues paid in the month of September will be valid through the following calendar year.)

Name_____

Address_____

City/State/Zip_____

Phone#_____

e-mail address_____

Please list immediate family members if paying Family Membership:

Tell us about yourself!

- **I am an artist...my medium is**_____
- **I am an art appreciator/supporter**

- **I am an educator**
- **Other(Care to share?)**_____

Any areas you would like to help with?

**Exhibiting • Publicity • Newsletter • Events
Community Support • Volunteering • Fund
Raising**

Comments or Suggestions?_____

Dues received \$_____ Date Paid_____
(form of payment: cash/check)

FAAS 1290 Hawthorn Drive Easton, PA 18040

Check us out on Facebook!

FAAS:Membership:Application.doc

6.12.19