

Membership Application



LEVELS OF MEMBERSHIP

(Please check one box only)

- Individual Membership \$40
- Student *(Under 18)* \$25
- Family Membership \$60
- Business Membership \$100
- Friends of **naac** \$ _____

Additional donations are always appreciated!

Payment (Please circle one and enter info):

Check # _____ **Cash \$** _____

Matching gift: If you work for an organization with a matching gift program for non-profit organizations, your support for naac may be matched by forwarding the appropriate form (available through your company) to naac along with your membership dues.

MEMBER INFORMATION

Artist's Name _____

(Parent Name also if artist is under 18)

Address _____

City _____

State _____ Zip _____

Phone _____

E-mail _____

Web site *http://www.* _____

(circle one)

Visual - Performing - Musical - Other: _____

Brief Description Of My Art: _____

Mail your completed and signed form and payment to:

Northwest Area Arts Council
P.O. Box 597
Crystal Lake, IL 60039-0597

I hereby apply for membership in the Northwest Area Arts Council and agree to be bound by program rules, guidelines, and the Bylaws of the organization. Permission is granted for naac to use my name and contact information, as well as representations of my art for purpose of furthering the goals of the organization.

(Signature)

(Date)