

## Membership Registration

Membership  
Level

Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

E-mail: \_\_\_\_\_

Website: \_\_\_\_\_

Area(s) of arts interest: \_\_\_\_\_

\_\_\_\_\_

If you are a working artist, what is your discipline:

\_\_\_\_\_

If someone is looking for an artist in your discipline, may we  
give out your contact information? YES  NO Would you like to help with volunteer projects? If so, please ask  
for our volunteer form to indicate your interests.

- |                          |                     |       |
|--------------------------|---------------------|-------|
| <input type="checkbox"/> | Student/Senior      | \$25  |
| <input type="checkbox"/> | Individual          | \$40  |
| <input type="checkbox"/> | Senior Family       | \$40  |
| <input type="checkbox"/> | Family              | \$50  |
| <input type="checkbox"/> | Business/Sustaining | \$65  |
| <input type="checkbox"/> | Benefactor          | \$150 |
| <input type="checkbox"/> | Patron              | \$250 |
| <input type="checkbox"/> | Sponsor             | \$500 |

Please make checks payable to  
Saratoga Arts  
320 Broadway  
Saratoga Springs NY 12866-4189

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