



NEW MEMBERSHIP APPLICATION

- | | | |
|---|---|---|
| <input type="checkbox"/> \$25 Student/Senior | <input type="checkbox"/> \$40 Senior Family | <input type="checkbox"/> \$150 Benefactor |
| <input type="checkbox"/> \$35 Non-Profit Org. | <input type="checkbox"/> \$50 Family | <input type="checkbox"/> \$250 Patron |
| <input type="checkbox"/> \$40 Individual | <input type="checkbox"/> \$65 Business/Sustaining | <input type="checkbox"/> \$500 Sponsor |

Name _____ Phone _____ Home / Work _____

Address _____

E-mail _____ Website: _____

Area(s) of arts interests? _____

Would you like to help with volunteer projects? _____ If so, ask for our volunteer form to indicate your interests (or download it from the "Help Us" page on our website)!

If you are an artist; please tell us your discipline(s): _____

If someone is looking for an artist in your discipline, may we give out your name and phone number? _____

Please make checks payable to:

Saratoga County Arts Council

and mail to us at

320 Broadway, Saratoga Springs, NY 12866