

MEMBERSHIP FORM

🗅 New	C Renewing	
Name		Date
Address		
City St	ate Zij	P
E-mail	Phone	
Are you an artist? 🗳 Yes 🛛 No		
If so, please describe what artform you are working in:		
□ Fine Art □ Crafts □ Photography □ Music □ Dance □ Literature □ Poetry		
Theatre/Performing Arts Other		
Please describe in more detail the nature of your work (i.e. jewelry, spoken word, etc.)		
Artist website (will be listed on NAA website)		
Artist facebook page		
Annual Membership Options		
□ Student, up to 22: \$25	🖵 Arts Supp	orter: \$100+
🖵 Senior, 70+: \$25	🗅 Arts Patro	on: \$200+
🖵 Individual: \$35	Arts Benef	factor: \$300+
Household: \$60		
Please make check payable to: Newark Arts Alliance Mail to: Newark Arts Alliance, 207 Louviers Dr., Newark, DE 19711 You can join online and pay by credit card: https://www.newarkartsalliance.org/become-a-member/		
I am interested in volunteering		
 Gallery Monitor (3-4 hrs. pe Special Events 	,	olunteer Coordination community Art Projects
Exhibition Committee		terature distribution
Gallery Shop Committee		
For more information, visit our website at: www.newarkartsalliance.org		
Like us on Facebook! https://www.facebook.com/NewarkArtsAlliance/		

OFFICE USE: Process date: _____ Exp. Date: _____ Method of payment: _____