



# Linn County Arts Guild Membership Application/Renewal Form

### Member Information

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
 Application Date: \_\_\_\_\_ Amount Paid: \_\_\_\_\_

### Membership Category -choose one

- Individual . . . . . \$20
- Student . . . . . \$10
- Family . . . . . \$30/spouse/partner
- Friend of LCAG . . . . . \$20
- Senior 65 - 79 . . . . . \$10
- Senior over 80 . . . . . no charge

### Membership Status - choose one

- New Membership
- Renewing membership
- youth # \_\_\_ add \$5 each add'l after 2 youth
- Share my info with other members?
- Yes, share my personal info
- No, do NOT share my personal info

### My artistic interests are:

- I am an artist and my medium is \_\_\_\_\_
- I am an educator
- I support the arts
- I am a student
- Other \_\_\_\_\_

### I am interested in helping with:

- Publicity     Membership     Arts education     Events     Grant writing
- Exhibitions     Public art     Hospitality

I am including an additional donation of \$ \_\_\_\_\_

### Family information if member:

Spouse/partner name: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Email: \_\_\_\_\_

- I am an artist and my medium is \_\_\_\_\_
- I support the arts \_\_\_\_\_
- I am interested in helping with: \_\_\_\_\_

### Youth information

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_  
 Name: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_  
 Name: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

**Send application and check to:** Linn County Arts Guild PO Box 1 Lebanon OR 97355

Phone: 541.497.0386 Email: lcag97355@gmail.com