

Port Ludlow Art League

Membership Application

Name: _____ Date: _____

Address: _____

Phone: (____) _____ Email: _____

Preferred artistic medium(s): _____

How did you hear about the Port Ludlow Art League?

- | | | |
|---|---|--|
| <input type="checkbox"/> A friend | <input type="checkbox"/> The Port Ludlow Voice | <input type="checkbox"/> Next Door Port Ludlow |
| <input type="checkbox"/> The PLAL Gallery | <input type="checkbox"/> The Port Townsend Leader | <input type="checkbox"/> Share & Explore |
| <input type="checkbox"/> Facebook | <input type="checkbox"/> The Peninsula Daily News | <input type="checkbox"/> The Port Ludlow Inn |
| <input type="checkbox"/> The Bay Club | <input type="checkbox"/> The Beach Club | <input type="checkbox"/> Other, please list |

The Port Ludlow Art League has many opportunities to be involved and to continue developing as an artist. What are you interested in learning more about:

- | | | |
|---|--|--|
| <input type="checkbox"/> Fundraising? | <input type="checkbox"/> Attending a class? | <input type="checkbox"/> Participating in a committee? |
| <input type="checkbox"/> Exhibiting your work? | <input type="checkbox"/> Exploring new mediums? | <input type="checkbox"/> Giving a demonstration? |
| <input type="checkbox"/> Learning more about art? | <input type="checkbox"/> Socializing with other artists? | <input type="checkbox"/> Other, please list |

Membership dues are \$40 for the calendar year. Benefits and activities include:

- | | | |
|--------------------------|--|------------------------|
| ◆ Share & Explore Class | ◆ Exhibit at Gallery, Port Ludlow Inn, local merchants | ◆ Artist of the Month |
| ◆ Art Chat - Show & Tell | ◆ Discounts at select art stores | ◆ Jeweler of the Month |
| ◆ Monthly Newsletter | | ◆ Group Art Exhibits |

You can mail your application and fee to P O Box 65267, Port Ludlow, WA 98365 or drop them off at the Port Ludlow Art Gallery located on the corner of Oak Bay Road and Osprey Ridge Drive. The Gallery is open Tuesday - Friday from noon to 4:00 p.m.

To be completed by Membership Committee:

Year	Payment Received	Amount	Date	Rec'd by
	<input type="checkbox"/> Cash <input type="checkbox"/> Check #			

Attn: Fran Bodman