

Warren Tri-County Fine Arts, Inc.

Application for Membership

Please read carefully and answer all questions.

Name _____ Home Phone _____

Address _____ Work Phone _____

City / State / Zip _____

New Member () Returning Member () e-mail _____

	Payment <u>April 1</u>	Payment after <u>May 31</u>
<i>Please circle payment amount.</i>		
Senior Membership (Must be 65 or older and a paid-up member for at least 3 years.)	\$25	\$30
Student Membership* (Must be 16 or older and have proof of full time student status - 12 credit hours or more per semester.)	\$25	\$30
Individual Membership	\$35	\$40
Family Membership (Must reside at same address)	\$60	\$65
Patron Membership Levels		
Romantics Atelier		\$100
Le Baroque Ecole		\$200
Renaissance Palazzo		\$500
Impressionists Salon		\$1000

*Parental permission is required for ages 16 and 17.

By my signature on this form, I agree I will comply with the Exhibit Rules and By-Laws of Warren Tri-County Fine Arts, Inc. (WTCFA) 5460 Arden, Room #418, Warren Community Center, Warren, MI 48092). I further affirm that the images in any artwork I submit for exhibition with WTCFA are my individual creations and are not knowingly copied from any other previously published or unpublished photographs, paintings, artwork or reproductions. (WTCFA will not be responsible for artwork that is found to be a copy. Any artwork found to be copies will be removed from exhibition.)

Signature _____ Date _____

Parent or Guardian (please print name) _____

WTCFA depends upon membership for help and cooperation at its functions and exhibits. If you have a special background or ability, such as computer, accounting, marketing, or event planning skills, please note them below. Thank you. _____