

MEMBERSHIP APPLICATION 2009

P. O. BOX 332, Lakewood, California 90714-0332

e-mail: lakewoodguild@yahoo.com

NAME: Last	 First
ADDRESS:	
HOME PHONE: ()	CELL/BUS. PHONE ()
E-MAIL	WEB
	INDIVIDUAL MEMBERSHIP \$20 FAMILY MEMBERSHIP \$25
FAMILY MEMBERS:	
YOUR MEDIA	Date of Birth
Would you be interested HOW? Fundraising hold a	& address in a directory yes/ on (circle one) in supporting your guild? Yes/ no (circle one)Shows teach Telephoning n office/committeeArt around town er Crafts Donations
I will support the aims & p for the advancement of the art by-laws of LAG & its members art. I will be professional in conot paid. I will exhibit only art work I will set up my exhibit on remove any art that may be cothe management of the exhibit Crafts must contain at lea LAG sponsored events. I will fees required and agree to dor receipt for income tax purpose LAG is not labile for any dresponsibility of the individua Membership may be denief failure to comply with its mem	st 80% of the exhibiting member's work to be eligible to be sold at follow all applicable rules for exhibiting artists. I will pay any set-up nate 10% of my total sales to LAG and in return LAG will furnish a les.
<u>I HAVE READ, UNDERSTAND, & AGREE TO ABIDE BY THE LAG MEMBERSHIP & EXHIBITORS CODE</u>	

Signed Date