



Central Coast Watercolor Society

New Membership Application

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Phone: _____

General Membership \$30.00

Student Membership \$20.00 (ID Card#) _____

Check for membership is to be sent to the following address:

CCWS C/O JERRY SMITH, P.O. BOX 2418, NIPOMO, CA 93444-2418