WAS USE

Date Joined/Renewed:	
Membership Good Thru:	
Payment Amount Received:	Method:



Please mail this completed form and your check/money order to:

Wellington Art Society Inc. P.O. Box 212943 Royal Palm Beach, FL 33421-2943 or

To pay via PayPal/Credit Card go to

Pay now PayPal

Member Information (Please Print Clearly)

Name		
□ RENEWAL – NO CHANGE TO II	NFORMATION	
Address		
City, State, Zip		
Medium(s) Email		
Website		
<u>Memberships</u>		MEMBERSHIP INFORMATION • Membership year extends from
☐ Individual \$60		July 1st - June 30th
☐ Youth/Full Time Student \$10	 Dues paid on or after April 30th will be applied to the following year Annual Renewal payments are due by 	
(14 -18 yrs. of age) Date of Birth		October 15 th • Exhibiting members are expected to attend Artist Reception for the shows where their artwork is on display
(optional donation amount) \$		
************	*******	*************
Select the Committee(s) you are in	nterested in volunte	eering on:
 □ Scholarships □ Whole Foods Exhibit □ Art Supply Donations □ Social Events □ Meetings/Programs/Demos □ Marketing/Social Media/Newsletter 	□ Art Fest□ Membership□ Hospitality□ Fundraising	each