

Terrace Art Gallery & GIFT SHOP

MEMBERSHIP FORM *(March thru March)*

Name: _____

Address: _____

City/Province: _____ Postal Code: _____

Telephone Number: _____

Email: _____

SELECT ALL THAT APPLY:

- I am an ARTIST // medium: _____
- I am interested in VOLUNTEERING
- I will help with FUNDRAISING

FEES:

- | | |
|--|----------|
| <input type="checkbox"/> Individual | \$30.00 |
| <input type="checkbox"/> Family | \$50.00 |
| <input type="checkbox"/> Student <input type="checkbox"/> Senior | \$20.00 |
| <input type="checkbox"/> Group / Club | \$100.00 |

cheques payable to: Terrace Art Association

Mail to:

Terrace Art Association

4610 Park Avenue Terrace BC V8G 1V6

e-transfer coordinator@terraceartgallery.com / password answer: Terrace
or dropped off at the Gallery at 4610 Park Avenue (lower level)

do not complete this section - staff use only

card issued: Access: Gmail: welcome: membership due: _____