



WILLIAMSVILLE ART SOCIETY MEMBERSHIP FORM

Date: _____

Name: _____

Address: _____

Phone: _____ Cell: _____

Email: _____

Emergency Contact (Name): _____ Phone: _____

I can receive the Show Prospectus by email: ☐ Yes ☐ No

PLEASE CIRCLE TWO (2) AREAS IN WHICH YOU WOULD LIKE TO HELP IN:

Hospitality	Technology	Show Committee	Newsletter
Program Scheduling	Elected Office	Publicity	Webmaster

ANNUAL MEMBERSHIP DUES: \$40

OPTIONAL: ON-LINE FEATURED ARTIST ON WEBSITE (THIS IS NOT FOR SHOW ENTRY)

1 PAINTING: \$15

2-4 PAINTINGS: \$30

5-8 PAINTINGS: \$50

TOTAL: _____

ANNUAL DUES MUST BE POSTMARKED BY SEPTEMBER 23. PLEASE MAKE CHECK OR MONEY ORDER PAYABLE TO:

WAS MEMBERSHIP
C/O BEVERLY AMBORSKI
4477 ARONDALE DR
WILLIAMSVILLE, NY 14221

*Thank you for your interest and support of the Williamsville Art Society.
Be sure to visit our website: WilliamsvilleArtSociety.com*

For more information, please call: Vicki Oliver, President: 716-983-5490