



MEMBERSHIP 2023-24

New Member _____ Returning Member _____ Date _____

You can **bring** this form and make payment at the next EVAA meeting, **or, print**, and **mail** this form along with your check for the appropriate amount to:

EVAA Membership, 773 E Cottontail Run, Cottonwood, AZ, 86326

Dues: __ \$30 Individual __ \$40 Family (2 max) / **Check #** _____ Cash _____

ADDITIONAL DONATION APPRECIATED \$_____

Name: _____

Update any changes since your last renewal, or indicate NO changes: _____

Address: _____

Phone: _____ Email: _____

I would prefer to receive notifications by: email__ phone__ text__

What is your media? _____

What medium /style would you like to learn? _____

mentor/demo? _____

Your organization needs you!

Please indicate any manner in which you would be willing to volunteer!

Newsletter __ Membership __ Show Venues __ Hanging Shows __ Programs __

Scholarship __ Advertising/PR __ Art Demos __ Other: _____

Office use: check # _____, Date: _____, Email _____, Dir _____, List _____, Vol _____