

Greater  
**CASTLE ROCK**

**MEMBERSHIP APPLICATION**

*Art Guild*

(Please clearly PRINT all information)

NAME: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

PHONE (Day / Evening / Cell) \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

EMAIL: \_\_\_\_\_

WEB SITE: \_\_\_\_\_

MEDIUM(s): \_\_\_\_\_

USE REVERSE SIDE, IF NECESSARY, TO ANSWER THE FOLLOWING MORE COMPLETELY.

Desired Outcome of membership in GCRAAG: (i.e. Classes, Programs, Fellowship with Artists, Exhibit Opportunities, etc.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I would like to offer: (Checkmark one or more) Classes \_\_\_\_\_ Program \_\_\_\_\_

Refreshments \_\_\_\_\_ Board Position \_\_\_\_\_ Projects \_\_\_\_\_ Exhibit Leadership \_\_\_\_\_

Other Comments (i.e. Your artistic history) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_\_

Membership Questions–Contact: Lisa Mallory ([summer4402000@yahoo.com](mailto:summer4402000@yahoo.com))

Mail check for \$35 for Family - \$25 for Individual - \$20 for Senior - \$15 for Student

(payable to GCRAAG) PLUS Membership application to:

Lisa Mallory GCRAAG Membership CH., 449 S. Xanadu St., Aurora, CO 80012