



718 E. Monte Vista Ave., Vacaville, CA 95688 707-448-8712
www.vacavilleartgallery.org gallery@vacavilleartgallery.org

MEMBERSHIP APPLICATION/RENEWAL

ANNUAL DUES: CHECKS PAYABLE TO VACAVILLE ART LEAGUE

- \$30___ Non-exhibiting membership \$60___ Exhibiting membership*
- \$30___ Gift Shop membership \$75___ Family membership**
- \$30___ Young Adult (14-25)*** \$100___ Group membership (up to 10)
- \$100___ Patron membership
- \$500___ Lifetime membership \$750___ Family Lifetime membership

DATE _____

The Fiscal Year is from July 1st to June 30th - Please re-new at this time. Only new members will be pro-rated. ("New", meaning one has never before been a member of VAL). If you renew late, the full year's rate is still due. If you no longer wish to be a member, please contact VAL in writing.

NAME _____ HOME PHONE _____

ADDRESS _____ CELL PHONE _____

CITY _____ ZIP CODE _____

E-MAIL _____

May we use your phone number and e-mail for our directory? yes ___ no ___

I give my permission to use photos of my artwork on the Gallery website, newsletter or other VAL publications: yes ___ no ___

MEDIA _____

*All work will be subject to screening prior to hanging.

I am interested in the following:

- ___newsletter ___art shows ___mailings ___Annual Juried Show ___publicity ___fundraising
- ___receptions ___programs (demos, workshops, classes, tours) ___telephoning ___public relations

***EXHIBITING MEMBERS ONLY:**

Agreement/Disclaimer on artwork: As a member of the Vacaville Art League, I understand that the Vacaville Art League will not be liable for theft, loss or damage which may occur to my work while displayed at the Gallery, stored at the Gallery, or exhibited at any League sponsored event or activity outside the Gallery. I understand the Vacaville Art League does not carry any insurance that covers my artwork. Insurance coverage desired on my work will be my sole responsibility.

SIGNATURE _____
Parent or Guardian if applicant is under 18

OFFICE USE ONLY:

Welcome Packet Mailed _____ Fiscal Year _____ Renewal _____ New _____
Paid \$ _____ Cash _____ Credit Card _____ Check # _____ Receipt# _____

**Young adults under the age of 18 must have application signed by their parent or guardian.

***Any family member, 14 years and older, living at the same address or not.