



Art Whitsunday Inc  
PO Box 57  
Cannonvale Qld 4800  
secretary@artwhitsunday.asn.au

Membership Application

Name/s (Mr, Mrs, Ms) \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_

Mobile \_\_\_\_\_

email \_\_\_\_\_

**Associate Membership** \$15

Includes workshops & electronic newsletters

**Full Membership**

Single \$30

Couple \$40

Includes exhibitions, workshops, electronic newsletters and gallery

All memberships are due for renewal on 1st July yearly.

Proposed by Art Whitsunday Member \_\_\_\_\_ Name

\_\_\_\_\_ Signature

Seconded by Art Whitsunday Member \_\_\_\_\_ Name

\_\_\_\_\_ Signature

List the areas of art you are interested in:

\_\_\_\_\_

List ways in which you may be able to contribute to the group

\_\_\_\_\_

We would encourage all new members to become involved in Art Whitsunday activities such as - Social Meetings, Committee and Sub-Committee positions, Outings & Excursions, Workshops and Roster participation at Exhibitions and Art Whitsunday Gallery.

I hereby apply for membership of Art Whitsunday Inc. I understand that annual membership is due 1st July each year.

Art Whitsunday may use images of myself or my work for promotional purposes.

Signature \_\_\_\_\_ Date \_\_\_\_\_

This application will be presented at the next Executive Committee Meeting for approval. The applicant must attend a general meeting and show an example of their work prior to approval of this application being granted.