

Date: _____
Fiscal year November 1 thru October 31
Minimum Age: 18 Years

Please Check One: New Renewal

Annual Donation:

- \$42 year - Individual
- \$50 year - Family
- \$75 or more year - Patron
- \$10 year - Website Link**



MEMBERSHIP APPLICATION

Please print and complete all areas that apply

Please check how you will help your League:

- Show Committee
- Scholarship Committee
- Membership Committee
- Refreshment Committee
- Newsletter Committee
- Artwork of the Month Committee
- Serve on the Board
- Nominating Committee
- Sell advertising
- Publicity
- Demonstrate at meetings
- Other: _____

Name: _____

Phone: (_____) _____ - _____

Address: _____

City: _____ State: _____ Zip: _____

Fax: _____

E-Mail: _____

Website address: _____

Art Media Used: _____

You will receive the monthly SAL newsletter, Art Beat, by email:

- I want my Website Link** on SAL's Members Art for Sale web page
(\$10 Website link annual fee, must also be a SAL member)*
- I do not want my information in the member directory or the SAL Website

How you learned about SAL? *(not required)*: _____

Send application & check made out to the Scottsdale Artists League to:
Scottsdale Artists League, P.O. Box 12551,
Scottsdale, AZ 85267,
Attn: Membership Chairperson

Administrative use only:
Payment type: _____
Total: _____
Expires: _____