



*Application for Membership*

Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Area of interest, i.e. watercolor, acrylic, oil painting, sculpture, carving, ceramics, woodworking, crafts, photography etc.

Yearly Dues: Regular \$30      Family \$40      Patron \$50

Please make checks payable to Los Padres Artist Guild

Mailing Address: P.O. Box 2415, Santa Maria CA 93455

*We are pleased to welcome you to a wonderful group of artists.*