

**APPLICATION FOR MEMBERSHIP IN THE  
THE SAN ANGELO ART CLUB, INC.**

119 West 1st street San Angelo, TX 76903 325.653.4405

Nurturing excellence in visual arts and promoting the spirit of art in our community and beyond, through exhibitions and education.

Name(s) \_\_\_\_\_  
 Address \_\_\_\_\_ City & Zip \_\_\_\_\_  
 Home Phone \_\_\_\_\_ Cell \_\_\_\_\_ Work \_\_\_\_\_  
 Email (print) \_\_\_\_\_

**Class of Membership (circle one)**

Active:	Individual	\$35	Couple	\$40
Associate:	Individual	\$30	Couple	\$35
Student:	Individual	\$15		
Lifetime	Individual	\$500		

**Donor Categories:**

Supporter \$100      Sponsor \$250      Patron \$500      Friend of Kendall \$10 - \$20  
 Total \$ \_\_\_\_\_  
 Application for (circle one): New member - Donor - Renewal (year) \_\_\_\_\_

**MY ART MEDIUM/MEDIA:** \_\_\_\_\_

**MY AREAS OF INTEREST:**

	Exhibit Committee		Membership Committee		Social Committee
	Gallery Committee		Ways & Means		Programs/Workshops
	Marketing Committee		House & Grounds		

**SAAC MEMBER MANAGING GALLERY REQUIREMENTS**

As an Active member of The San Angelo Art Club, Inc. I agree to abide by all provisions in the By-laws and Standing Rules, including, but not limited to the responsibility of managing the Kendall Art Gallery on ASSIGNED DAYS. All members may switch days or hire a Gallery substitute. I understand that my name, address, telephone number and email will be listed in the SAAC Directory.

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

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

Please submit this form and payment to the Membership Chair, or mail to the address above.  
 SAAC Membership year is September / August.

**Club Use Only:**

Membership recommended Date:		Club Officer
Receipt #	Check #	Cash: