



Membership Application

Please complete the form and return with payment to:

Rappahannock Art League
19 North Main Street, Kilmarnock, VA 22482
804.436.9309 (Voice) 804.436.8899 (Fax)

Name(s): _____ Date: _____

Address: _____

Town: _____ State: _____ Zip: _____

Phone: area code (____) _____ Email: _____

Membership Categories - Please check one:

Regular Membership: _____ \$45.00 per Household

Premium Membership: _____ \$100

Form of Payment:

- Check (please include check number): _____
- Cash
- Charge (by phone or at Studio Gallery) Type of card: _____

I am interested in the following Volunteer Opportunities:

- | | |
|---|---|
| <input type="checkbox"/> Studio Gallery Volunteer | <input type="checkbox"/> Publications |
| <input type="checkbox"/> Helping with Exhibits | <input type="checkbox"/> Technical Support |
| <input type="checkbox"/> Patrons Gala | <input type="checkbox"/> Children's Program |
| <input type="checkbox"/> Labor Day Show | <input type="checkbox"/> General Office Support |
| <input type="checkbox"/> Special Events | <input type="checkbox"/> Other |
| <input type="checkbox"/> Receptions | |

Would you like to receive Artline electronically? Yes No

The RAL invites you to provide a thumbnail description of yourself, including for example: current activities and interest in the arts; your career, life's work, or avocation; or anything else you would like to share for possible use in our monthly newsletter, "Artline".

Memberships are tax deductible.