



Portsmouth Arts Guild
P.O. BOX 463, 2679 EAST MAIN ROAD
PORTSMOUTH, RI 02871

MEMBERSHIP FORM

PRINT and mail this form to the address above with your payment. Thank you!

Membership Level - Circle one

Sponsor (\$100) Family (\$65 annually) Individual (\$50 annually) Student (\$25 annually)

The Portsmouth Arts Guild Membership Year is from March 1 to February 28/29

Is this a gift membership? ____ If yes, your name _____

Please add recipient's information below and indicate either your or recipient's information.

*Name: _____

*Address: _____

*City/State/Zip: _____

*Email: _____ *Phone: _____

Art Medium: _____ Website/Social Media: _____

New Membership _____ Referred by: _____

Would you be interested in the following:

- | | |
|---|--|
| <input type="checkbox"/> Teaching a class or workshop | <input type="checkbox"/> Giving a lecture or demonstration |
| <input type="checkbox"/> Communications and Publicity | <input type="checkbox"/> Fund Raising |
| <input type="checkbox"/> Performing Arts | <input type="checkbox"/> Workshops and Classes |
| <input type="checkbox"/> Exhibitions | <input type="checkbox"/> Programs and Events |
| <input type="checkbox"/> An "as needed" extra pair of hands | <input type="checkbox"/> Thursday Open Studio Zoom |

We want to know you! Please add any additional information about your interests.
