

# Duxbury Art Association Membership Form

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Please complete this form and mail to: **Duxbury Art Association – Membership**  
**P.O. Box 204A**  
**Duxbury, MA 02331-0504**

Full Name (Last, First): \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Telephone (home): \_\_\_\_\_ Telephone (other): \_\_\_\_\_

I am an Artist/Artisan (Yes/No): \_\_\_\_\_ Medium: \_\_\_\_\_

I am: \_\_\_\_ a new Member; or \_\_\_\_ renewing my membership.

## Membership Category (please select one):

- \_\_\_\_ \$500 Sustaining (includes 4 tickets to the Summer Member Show and the Winter Juried Show)
- \_\_\_\_ \$250 Benefactor (includes 2 tickets to the Summer Member Show and the Winter Juried Show)
- \_\_\_\_ \$150 Patron (includes 2 tickets to the Summer Member Show)
- \_\_\_\_ \$65 Family
- \_\_\_\_ \$40 Individual
- \_\_\_\_ \$30 Senior/Students (62+)

I would like to make an additional donation in the amount of: \$ \_\_\_\_\_

You may pay by check or pay online at: <http://duxburyart.org/membership/>

Total Payment by Check Enclosed: \$ \_\_\_\_\_

Total Payment Made Online: \$ \_\_\_\_\_ Online Payment Date: \_\_\_\_\_

Membership year runs from June 1<sup>st</sup> through May 31<sup>st</sup>.

DAA is eligible for corporate matching gifts. Please include your company's matching gift form!

I am interested in volunteering (select all that apply):

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|--------------------------|-------------------------------------|----------------------------|
| ____ Gallery/Exhibitions | ____ Open Studio Host               | ____ General Office Duties |
| ____ Member Services     | ____ Artist Services                | ____ Finance               |
| ____ Summer Member Show  | ____ Winter Juried Show             | ____ Craft Show Case       |
| ____ Fundraising         | ____ Grant writing                  | ____ Public Relations      |
| ____ Art talks/lectures  | ____ Other (please describe): _____ |                            |

