



**Please sign me up** as a member of the Salinas Valley Art Association.

Enclosed is my check for annual membership:

\_\_\_ \$30.00 Single Member

\_\_\_ \$45.00 for Family Membership  
(more than 1 artist in a family)

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

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

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

Phone

Home: \_\_\_\_\_

Cell: \_\_\_\_\_

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

Website (If you have one):  
\_\_\_\_\_

My preferred media is

\_\_\_ Oil    \_\_\_ Acrylic    \_\_\_ Watercolor    \_\_\_ Mixed Media    \_\_\_ Other

#### VOLUNTEER INTERESTS

- Newsletter     Membership  
 Publicity     Event Planning  
 Website     History

**Send this form + your check to :**

SVAA  
P.O. Box 4823  
Salinas, CA 93912-4823

[www.SalinasValleyArtAssociation.com](http://www.SalinasValleyArtAssociation.com)