



**Become a Member Today!**  
**Support the Arts in the Mt. Washington Valley!**

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

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

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

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Website: \_\_\_\_\_

**Membership Levels:**

Individual \$40

Family (2 adults) \$50

Student K-12 FREE   
*(valid student ID required)*

Lifetime Individual \$1000

I would like to support the MWVAA by volunteering

Business \$100

Donation \$ \_\_\_\_\_

|                                                                                                          |
|----------------------------------------------------------------------------------------------------------|
| <b>METHOD OF PAYMENT:</b>                                                                                |
| <input type="checkbox"/> Cash                                                                            |
| <input type="checkbox"/> Check Please make check payable to "MWVAA"                                      |
| <input type="checkbox"/> Credit Card VISA: <input type="checkbox"/> MASTERCARD: <input type="checkbox"/> |
| Credit Card #: _____ Exp. Date: _____ CVV (3-digit code): _____ Zip Code: _____                          |
| Signature: _____                                                                                         |
| <b>WELCOME to your Arts Association ... what can we do for you?</b>                                      |
| Are you a beginning artist? _____ If "yes", what medium(s) do you wish to explore? _____                 |
| Are you a juried artist? _____ If "yes", where were you juried? _____                                    |
| Are you interested in taking classes/workshops? _____ If "yes", what specifically interests you? _____   |
| Additional comments/questions: _____                                                                     |
| _____                                                                                                    |

*Contributions to the MWVAA are tax deductible to the extent allowed by law*  
**Mail Form To: MWVAA, P.O. Box 1603, North Conway, NH 03860**  
**603.356.ARTS (2787) www.mwvarts.org**