

San Carlos Fine Arts Association Membership Application Form

Dues are \$30.00 per year.

Please fill out a check to "San Carlos Fine Arts Association" and mail to
P.O. Box 83, San Carlos, CA 94070

Name: _____

Address: _____

City & Zip: _____

Telephone: _____ Email: _____

What are your artistic interests?

Where would you be interested in serving (such as publicity, telephone committee, newsletter, shows and exhibit organization, etc)?

If not a San Mateo County resident, please name your San Carlos affiliation: _____

Referred by: _____

Applicant's Signature: _____ Date: _____