



**ILLINOIS ART LEAGUE MEMBERSHIP APPLICATION 2019**

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

Names (s): \_\_\_\_\_

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

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_\_

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

**Status:**    \_\_\_New Member    \_\_\_ Renewal    \_\_\_ Artist    \_\_\_ Friend/Patron

Amateur\_\_\_    Semi Professional \_\_\_    Professional \_\_\_

Age: 18-30\_\_\_    31-50\_\_\_    51 & over\_\_\_

Medium(s) Preferred: \_\_\_\_\_

**Interest:**

**Volunteer:**

\_\_\_Enter my art in shows

\_\_\_Help set up take down shows

\_\_\_Workshops/Seminars

\_\_\_ Greeter for Shows

\_\_\_Classes

\_\_\_Serve on Board

\_\_\_Small Groups

\_\_\_Serve on Committee (s) for:

\_\_\_Shows \_\_\_Exhibits \_\_\_ workshops \_\_\_Classes

**MEMBERSHIP YEAR IS JAN 1<sup>ST</sup> – DECEMBER 31<sup>ST</sup>.**

**Individual Membership \$40.00 \_\_\_ Family Membership \$50. \_\_\_ Friend/Patron Membership \$50.00**

Please complete and return with your check payable to **ILLINOIS ART LEAGUE**

**Mail to: IAL PO BOX 3532 PEORIA, IL 61612-3532**

**www.illinoisartleague.com**