

MEMBERSHIP APPLICATION

To join our association of artists and art enthusiast, please provide the information requested and mail this form with remittance to:

Pomona Valley Art Association, P.O.Box 932, Claremont, CA 91711 or visit us at: Gallery SOHO, 2027 Montclair Plaza Lane, Montclair, CA 91763 (909)624-4900.

This N	Membership is: 🔲 New	Renew	al 🔲 C	hange	SPECIFY		
Pleas	e PRINT legibly				SPECIFY	_	
1 1040	3 1 1111 13 giziy						
Name							
Additi	onal Names (Couple and F	amily Membership	os only)				
Street	t			Apt / Spc / Unit			
City _			State ZIP				
Cell P	Cell Phone Home Phone						
Email							
Webs	ite						
	I would like to join :	the Pomona Val	lev Art Assoc	ciation at the	e followina level:		
□ \$	15 Student under 18 year				-	n ner vear	
_	·	\$100 Sustaining one time contribution per year					
\$30 Single Individual Membership			\$250 Patron one time contribution per year				
\$40 Couple two Co-habitants *			\$1,000 Lifetime Individual lifetime membership				
\$60 Family Immediate family *			\$5,000	Lifetime	Family lifetime memb	ership	
* at a co	mmon residence						
P۱	/AA Membership entitles men				and constitutes agree	ment to	
		abiding by PVAA	membersnip (guidelines.			
Pomona Valley Art Association "Bringing Art to Life" since 1952							
PVAA OFFICE	Member ID	Receipt No.		Check No.		Gallery	
USE		Date Pd		Cash	СС	— — Mail	