

Saint Louis Watercolor Society

MEMBERSHIP APPLICATION



Please print this form, complete, and send with your \$35 check to:

Saint Louis Watercolor Society
P O Box 16893
St. Louis, MO 63105

Name: _____
Address: _____
City: _____
State/Zip: _____
Phone: _____
Email: _____
Website: _____

We invite you to indicate your preferences for volunteer work:

Data Entry ____ Phone Calls ____ Hang Exhibits ____
Receiving at Shows ____ Set Up for Meeting Programs ____
Write Articles for Newsletter ____ Social Media: Facebook Adm ____
Hospitality: Set Up for Refreshments ____ Greeter at Meetings ____
Solicit Donations ____ Press Releases ____
Keep Track of DVD Rentals ____ Help with Set Up for Workshops ____
Projector Operator at Meetings ____

Do you teach watercolor classes?

Yes____ No____

Do you want to “Go Green” and view our quarterly newsletter on our website rather than receive a hard copy in the mail?

Yes____ No____