



High Country Art Association

P.O. BOX 802, Pinetop, AZ 85935 - www.highcountryartgallery.com
membership@highcountryartgallery.com

MEMBERSHIP APPLICATION

(Memberships run from January 1, through December 31 – Gallery open May through September)

Name _____ Spouse _____

W. Mtn. Mailing Address _____ City _____ Zip _____

Phone () _____ Cell Phone _____ Media _____

Your Newsletter will be e-mailed to you unless otherwise requested. e-mail _____

Winter contact information (if different from above):

Mailing Address _____ City _____ Zip _____

Phone () _____ e-mail _____

General Membership: _____ (\$45.00 per year) - New members must submit 3 samples of art and a biography with application, if you choose to exhibit, you must sit the gallery, per gallery rules.

Associate Member: _____ (\$100.00.) Limited display of work, does not sit gallery, no member benefits

Honorary Member: _____ **Life Member:** _____

Dues are payable by April 15th. After that, there is a \$10.00 late fee for continuing member.

It is agreed that the Association will display qualified art work of Exhibiting Member at the High Country Gallery and retain twenty five percent (25%) of the retail price of any work sold from the gallery and that Exhibitor has read the gallery rules and will abide by them. Member must become adequately trained, by attending training sessions, to man the gallery and will sit the gallery at least two times each month that his/her work is displayed, or as often as is necessary. The Association will take all reasonable precautions to protect the member's work, but Exhibitor will not hold the Association responsible for damage or loss.

Signature: _____

Complete, Circle and Sign below. Fill in entire Membership application before submitting

The member understands that the July 4th Arts & Craft Festival is the sole means of fundraising that allows us to have a gallery, promote the arts and give scholarships. **All exhibiting members are required to help with the festival.** Plan to work a minimum of 8 hours during the festival.

Please circle your work time preference: Mornings Afternoons

I have a spouse or friend willing to help YES

Please circle all the areas in which you are willing to help.

- | | |
|--------------------------|---|
| Two weeks ahead | Distribute Flyers to Businesses & Motels |
| Two days prior: | Measure and mark spaces |
| One day prior: | Check in Exhibitors |
| | Help put up tents for information booth and Silent Auction |
| During the Show: | Monitor a gate |
| | Check in Exhibitors |
| | Sit information booth |
| | Work Silent Auction |
| Last day of show: | Clean up Orchard grounds |
| | Help take down tents for information booth and Silent Auction |

I will donate a piece of art for the Silent Auction Yes ___ No ___ (donation not required, but gratefully accepted)

NAME (Please print): _____ PHONE NO. _____