



Membership Form

Please mail form to Beaufort Art Association, PO Box 625, Beaufort, SC 29901

Please circle all categories that apply:

Individual \$50 Family \$75 Patron \$50 and over Corporate \$50 and over
Student \$25

Exhibiting Member \$50 + \$150 + one day a month staffing = \$200

Name _____

Address _____

City _____ State _____ Zip _____

Home Phone (____) _____ Cell Phone (____) _____

Email _____ Artist _____ Supporter of the Arts _____

Cash _____ Check _____

Signature _____ Date ____/____/____