

NATIONAL CAPITAL ART GLASS GUILD

MEMBERSHIP APPLICATION

(please print)

■ **Date**

■ **Membership**

Individual - \$25 annually

Two-member (studio, family) - \$30 annually

■ **Dues Amount Enclosed \$**

■ **Member**

First name

MI

Last Name

■ **Second Member** (if applicable)

First name

MI

Last Name

■ **Glass Business** (if applicable)

■ **Mailing Address**

Street

City

State

Zip

■ **Contact Info**

Home Phone ()

Work Phone ()

E-Mail:

Website:

■ **Guild Committee you can help with (Shows, Events, Hospitality, Membership, Publicity/PR, Workshops)**

■ **How did you find us**

■ **Comments**

Please mail completed application and check to:

NCAGG Treasurer
c/o Ann Byron
1500 Casino Circle
Silver Spring, MD 20906-5910