



## 2016-2017 MEMBERSHIP APPLICATION

RENEWAL

NEW MEMBER

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ POSTAL CODE: \_\_\_\_\_

TEL: (\_\_\_\_) \_\_\_\_\_ EMAIL: \_\_\_\_\_

OIL  WATERCOLOR  PASTEL  OTHER : \_\_\_\_\_

FOCUS (PORTRAIT, LANDSCAPE, ETC.) \_\_\_\_\_

I am interested in helping the Association: Exhibitions  Telephone  Translation

Other (Specify) \_\_\_\_\_

Beaconsfield Resident 45\$

Non-Resident 50\$

**N.B. Preference is given to Beaconsfield residents**

Cash

Check

Please send completed form and membership fees to: *Beaconsfield Artists' Association*, at one of the following addresses:

**C/O Huguette Gabriel  
49 Lakeshore Road  
Beaconsfield QC H9W 4H5  
Telephone: 514-426-2186**

**OR**

**Centennial Hall  
ATTN: BAA MEMBERSHIP  
288 Blvd Beaconsfield  
Beaconsfield, Québec H9W 4A4**

**Registration fees must be paid on or before September 14<sup>th</sup>, 2016**