



TALLAHASSEE WATERCOLOR SOCIETY

MEMBERSHIP APPLICATION

Serving artists in Florida, Alabama and Georgia

Name

Please Print

2nd Name

Family/Household Member Name (if applicable)

Address

Phone

Email

Individual \$30

Family/Household \$40

Business \$50

Artist's Website, if applicable

Please complete this form, print and mail with your check made payable to the Tallahassee Watercolor Society. Mail to: TaWS Membership, PO Box 38502, Tallahassee, FL 32315-8502.

I am a new member.

This information represents a change in my:

Address

Email

I am a renewing member.

Phone

Website