

Hinesville Area Arts Council

Membership Application

Membership Year: 2009

Corporate Membership

| | |
|---|-------------------------------------|
| Name of Corporation, Business or Activity | _____ |
| Address of Corporation, Business or Activity | Street _____ |
| | City _____ State _____ Zip _____ |
| Work Telephone # | () - _____ - _____ |
| | Fax # () - _____ - _____ |
| Email Address | _____ |
| Local Address (If Different from Corp) | Street _____ |
| | City _____ State _____ Zip _____ |
| Work Telephone # | () - _____ - _____ |
| | Fax # () - _____ - _____ |
| Email Address | _____ |

Please provide the names, contact numbers and email addresses of up to three local or corporate contacts.

| Name | Contact Number | Email Address |
|------|----------------|---------------|
| | | |
| | | |
| | | |

Individual Membership

| | |
|---|---|
| Name | _____ |
| | Last First M.I. Salutation |
| Address | Street _____ |
| | City _____ State _____ Zip _____ |
| Contact # () - _____ - _____ | Alternate # () - _____ - _____ |
| Email Address | _____ |

Please check all areas that you may be able to assist with.

- | | |
|---|--|
| <input type="checkbox"/> Event Coordination | <input type="checkbox"/> Financial Assistance |
| <input type="checkbox"/> Event Volunteer | <input type="checkbox"/> Logistical Assistance |
| <input type="checkbox"/> Membership Drives | <input type="checkbox"/> Advocacy |
| <input type="checkbox"/> Board of Directors | |

What special talents or abilities do you possess that may be of assistance to the Hinesville Area Arts Council?

Do you possess an educational specialty in the arts, literature or humanities? Yes / No

If yes, please explain. _____

Please tell us what kind of arts related activities *you* would like to see take place in Liberty County?

- Please check here if you authorize the Hinesville Area Arts Council to list your name as a benefactor for the organization on our official website.

Corporate Members

- Please check here if you authorize the Hinesville Area Arts Council to list *your* Corporation's name on our official website.

Please check here if you authorize the Hinesville Area Arts Council to list *your* Corporation's name on 2009 event programs.

By signing below, you are accepting membership in the Hinesville Area Arts Council, a registered Georgia Non-profit organization whose mission it is to assist in the creation of a stronger, unified community through the arts. You are indicating that you are the person whose individual information is completed in this application or you are the authorized agent to sign for membership as a representative of the applying Member Corporation and possess the authority to authorize the decisions of the Corporation as it applies to this application.

Signed Name

Printed Name

Date Signed