



## FEDERATION OF CANADIAN ARTISTS

1241 Cartwright Street, Vancouver, BC, V6H 4B7, Canada

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fca-admin@artists.ca

Website: www.artists.ca

### NEW MEMBERSHIP APPLICATION

(please print clearly)

Mr.  Mrs.  Ms. First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Suite # \_\_\_\_\_ Street Address \_\_\_\_\_

(city) \_\_\_\_\_ (province) \_\_\_\_\_ (postal code) \_\_\_\_\_ (country) \_\_\_\_\_

Telephone numbers: (home) \_\_\_\_\_ (work) \_\_\_\_\_ (Fax) \_\_\_\_\_

E-mail: \_\_\_\_\_

print in upper and lower case as it would be typed

Chapter Affiliation, if any: \_\_\_\_\_

#### PAYMENT

Annual Fee for Supporting Membership is **\$50.00**, however, if you are **joining** partway through the year, you only need to pay for the remainder of the year. Your payment will depend on the date you are joining.

If it is **January, February or March**, pay **\$40.00** for the rest of the year.

If it is **April, May or June**, pay **\$30.00** for the rest of the year.

If it is **July, August or September**, pay only **\$20.00** for the rest of the year.

If it is **October, November or December**, pay **\$50.00** for the rest of this year and all of the next year.

Date paid \_\_\_\_\_ Amount paid \_\_\_\_\_

cheque  cash  please charge my credit card: card type \_\_\_\_\_

Card # \_\_\_\_\_ Expiration date \_\_\_\_\_

I am interested in volunteering to help the FCA with:

\_\_\_\_\_  
(gallery assistant, stuffing envelopes, hosting, hanging shows, shipping, etc.)

I would prefer to volunteer on  a regular basis  on call  on call, occasional