

## Membership Form - Kansas Artist Craftsmen Association

Name \_\_\_\_\_

E-Mail \_\_\_\_\_ (req'd)

Address \_\_\_\_\_ City \_\_\_\_\_

ST/Zip \_\_\_\_\_

Phone (h) \_\_\_\_\_ (w) \_\_\_\_\_ (cell) \_\_\_\_\_

Briefly- your affiliation (faculty, studio artist, student, etc...) and medium

Dues enclosed \_\_\_\_\_

### DUES Schedule

Family membership - \$35

Single membership - \$30

Student membership - \$25

### Mail form and dues to:

Glen Brown

Dept. of Art, 322 Willard Hall

Kansas State University

Manhattan, KS 66506-3705