

Associates of the Winnipeg Art Gallery Application Form

Personal Information: (please print)

Last Name: _____ First Name: _____

Home Address: _____

City/Prov: _____ Postal Code: _____

Phone: _____ E-mail: _____

Emergency Contact: _____ Ph: _____

How did you learn about the Associates? Why do you wish to join?

Provide a brief outline of your educational, work and volunteer history.

I am interested in participating in the following activities:

- ☐ Art Education Programs – Lectures, tours, and films exclusively for members
- ☐ Travel Tours – Art tours arranged to countries of cultural interest around the world
- ☐ Social activities – e.g. Welcome Back Wine and Cheese, Holiday Party

I am interested in volunteering in the following areas:

- ☐ Special Fundraising Events – Home Tours, Art in Bloom, Gallery Ball, Crafted
- ☐ Making phone calls for WAG events, membership renewals, fundraising
- ☐ Providing administrative support to Archives and Learning & Programs
- ☐ Helping set up studio classes

WAG-Qaumajuq Membership

- ☐ I have a current WAG-Qaumajuq membership
- ☐ I have paid my Associates membership dues (\$40 / \$10 for students)

Payment Method

☐ Cheque ☐ Cash ☐ Debit ☐ Visa ☐ MasterCard ☐ American Express

Credit Card Number

Expiry date

Signature of Cardholder

Please make cheque payable to "Winnipeg Art Gallery". Mail to: Associates, Winnipeg Art Gallery, 300 Memorial Blvd., Winnipeg, MB R3C 1V1.

Please print & mail to: Associates of the Winnipeg Art Gallery 300 Memorial Blvd. Winnipeg, MB R3C 1V1