



NEW MEMBER APPLICATION

Clark County Artists Guild
3172 N. Rainbow Blvd. #160
Las Vegas, NV 89108
www.CCArtistsGuildVegas.com
(725) 333-7656

(Please print clearly)

Birth: Month _____ Day _____

Name: _____

Address: _____ Zip _____

Phone (C): _____ Phone (H): _____

Email: _____ Website: _____

Media & Style: _____ Are you interested in: Teaching YES NO
Becoming a committee member YES NO

Membership Dues: \$36.00 per year. Artist Member: _____ Associate Member: _____

Payment rec'd by: _____ Amount: \$ _____

Check # _____ Cash \$ _____ Credit Card/Scan \$ _____ (\$37.00)

Please make your check payable to: **CCAG or Clark County Artists Guild**

Mailing address:

Treasurer, Clark County Artists Guild, 3172 N Rainbow Blvd. Ste #160, Las Vegas, NV 89108.

Meeting Info: Monthly meetings are held at Total Wine & More: 730 S. Rampart Blvd, Las Vegas, NV 89145
6:00 - 8:30 p.m. Meeting dates can be found on the website or in our newsletter.

Bring 2 original examples of your work to show on your first visit to our monthly meeting.

- To join the CCAG, I understand that my membership and yearly renewal is dependent on the continued adherence to the CCAG Bylaws and guidelines, as well as timely payment of annual dues and professional/ courteous behavior.
- At no time will unprofessional conduct be tolerated. The CCAG reserves the right to discharge any member from the guild who is not in compliance with the CCAG Bylaws and guidelines, along with a prorated refund.

Signature: _____ Date: _____