



## MEMBERSHIP FORM

PLEASE PRINT CLEARLY:

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ ST: \_\_\_\_\_ ZIP: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

WEBSITE ADDRESS: \_\_\_\_\_

*(Must provide a valid website address to be included in the listing.)*

- I am an *Artist*, please list my website link on the GCWS Website Members Page.
- I am an *Art Instructor*, please list my website link on the GCWS Teaching Members Page.

CELL #: \_\_\_\_\_ HOME #: \_\_\_\_\_

PLEASE CHECK ONE:

- NEW MEMBER
- RENEWING MEMBER

DUES (Please check one):

MEMBERSHIP CHAIR TO RECEIVE BY NOVEMBER 15

- INDIVIDUAL                      \$45.00
- FULL TIME STUDENT              FREE

Please make checks payable to GCWS  
Mail this form and check to:

GCWS Membership  
1350 E Sunrise Blvd, Ste. 113  
Fort Lauderdale, FL 33304

IMPORTANT INFORMATION:

- Points earned toward signature membership status will expire, if you do not renew.
- Discounts available at some GCWS Partners.