



PASADENA SOCIETY OF ARTISTS

Membership Application

Please submit an Artist Statement in addition to the following information:

Name: _____

Email: _____

Mobile phone: _____ **Home phone:** _____

Mailing address: _____

Website: _____

Media of art submitted: _____

Art Education:

How did you hear of PSA?

What skills, experience or other interests could you bring to the society? Your volunteering is very crucial to enable PSA to benefit all members.

How many of these PSA membership benefits are of interest to you?

Exhibition opportunities _____ Website exposure _____ Interaction and involvement with other artists _____

Social interaction with artist community _____ Lectures, workshops, demonstrations _____

Volunteering at art events _____

Other: