



We have heART!

Wellton – Mohawk Artisans Guild

Membership Application

NAME: _____

(Dues may be changed without notice.)

Date
joined: _____

Annual membership \$30: \$ _____

Donation: \$ _____

You may renew your membership by mail or at the monthly general meeting, either cash or check. Make checks payable to “WMAG” and if mailed sent to:

Superintendent
Wellton-Mohawk Artisans Guild
P.O. Box 1169
Wellton, AZ 85356

Email _____

Phone _____

Local _____

Address _____

Total paid \$ _____

Note: \$5 of each membership goes to support the Pioneer Museum.

A Consent and Release Agreement is required to attend workshops and classes and is good during your membership.

I am interested in becoming a board or committee member for the following:

- ART SHOWS
- BOARD MEMBER
- FACEBOOK
- FUNDRAISING
- GALLERIES
- JUDGING
- MEMBERSHIP
- NEWSLETTER
- PUBLICITY
- SECRETARY
- SUPERINTNDENT
- TREASURER
- SPECIAL EVENTS
- VOLUNTEERING
- WEBSITE
- WORKSHOPS

Other: _____

Welcome to the
**Wellton-Mohawk
Artisans Guild**

