Membership Application

MCG Arts COUNCIL

Application Category (Please check one):

❑ Individual ($25) ❑ Family ($40) ❑ MCG Student ($5) ❑ Spouse of Student ($5)
❑ Affiliate Partner (MCG affiliated organization) ($50)
❑ Nonprofit Organization Member (5 or fewer employees, $25; more than 5 employees, $50)
❑ Corporate Member ($100)
Dues period runs from July 1st through June 30th.

Date:_____

❑ Individual or Head of Family ❑ Partner/Organization/Corporate Representative
❑ Mr. ❑ Mrs. ❑ Miss ❑ Ms. ❑ Dr. ❑ Other:_____

Last Name: First Name: Initial(s):

Title:

Partner/Organization/Corporation:

Mailing Address:

City: State: Zip Code:

Daytime Phone: Alternative Phone:

Fax: E-mail:

Preferred method of contact ❑ Mail or ❑ E-mail

Primary Artistic Interests:

Fine Arts—
❑ Art Collection ❑ Drawing/Painting ❑ Sculpture/Ceramics ❑ Print Making
❑ Photography ❑ Environmental/Installation Art
Performing Arts—
❑ Chorus ❑ Music ❑ Dance ❑ Drama/Theater ❑ Performance Art
❑ Dramatic Reading & Storytelling ❑ Stagecraft/Set Design
Literary Arts—
❑ Poetry ❑ Creative Writing

Volunteer Interests:

❑ Art Exhibition ❑ Healing Arts ❑ MCG Chorus ❑ MCG Players
❑ Noon Concert Series ❑ Historical Collections ❑ Fundraising ❑ Publicity
❑ Other:

Please send to: Laurie Lane
Membership Director, MCG Arts Council
School of Medicine, AE 2030
Medical College of Georgia
1120 15th Street
Augusta, GA 30912

For questions, please contact Laurie Lane at 706/721-4056 or llane@mail.mcg.edu