

Coastal Pastel Society of North Carolina

P. O. Box 4161

Emerald Isle, North Carolina

Membership Application

Name: _____

Address: _____

Web Site: _____

Telephone: _____ Cell Phone: _____

Are you willing to serve as an officer? _____ Yes _____ NO

Are you willing to serve on a committee? _____ Yes _____ NO

Committee Preference: (Circle Below)

Program Committee

Workshop Planning Committee

Art Show Committee

Newsletter Committee

Publicity Committee

Would you be willing to coordinate a CPSNC Meeting in your area?

What would you want the CPSNC to accomplish to meet the interests and concerns of pastel artists?

Other Comments:

Date Dues Received: _____

By-laws of CPSNC received: _____ Yes _____ No

Membership Booklet received: _____ Yes _____ No