

# Leominster Art Association

## Membership Application

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_

New Member [  ]      Renewal [  ]

Amount Enclosed: \_\_\_\_\_

### Membership Fees

*Single \$30.00 • Family \$40.00 • Student \$15.00*

Please mail to: Leominster Art Association  
P.O. Box 643, Leominster, MA 01453