



2012 MEMBERSHIP APPLICATION

Please write legibly

Name: _____ Date: _____

Last

First

Organization/Title:

Address:

City/State/Zip:

Phone:

Fax:

Email:

Website:

Artistic Discipline

--check all that apply--

- Theatre Visual Art Dance Multidisciplinary
 Writing Film/Video Music Other: _____

Membership & Fees

- Organization Individual Patron Student/Senior
 \$150 \$35 \$35 \$15

Amount enclosed: \$ _____

Mail completed application and appropriate fee to: African American Arts Alliance of Chicago
4450 N Clark Street
Chicago, IL 60640

4450 N. Clark Chicago, IL 60640
Phone -773-754-3923
Fax - 773-769-4533