



GIBSONS PUBLIC ART GALLERY

SUPPORT PUBLIC ART! JOIN US.

Date: _____

- Membership** **Donation** **Volunteer**

First Name: _____ Last Name: _____

Address: _____

City: _____ Postal Code: _____ Telephone: _____

E-mail(s): _____

- Yes! I wish to receive e-mail news from GPAG. No, please do not send me GPAG e-mail news.

Annual Membership:

- Individual (\$20)
- Artist (\$20) - Are you interested in selling your artwork in our Gift Shop? Yes No
- Student (\$10) registered school: _____
- Family (\$35) other family member names and e-mail addresses (max. 4, incl. principal applicant)
- _____

Donation:

Help the Gallery with a donation and become a Member Sponsor! (tax receipts issued for \$25 and over)

- Friend \$25 Contributor \$50 Supporter \$100 Community Partner \$250
- Patron \$500 Benefactor \$1000 + Other amount: _____

Volunteer:

We're a volunteer non-profit organization that exists to provide a publicly accessible community space to share, discuss, teach, create and promote art. A gift of your time and talents makes a real difference! How would you like to help?

- Teaching or speaking about art Fundraising (grant writing / researching / coordinating)
- Planning events Supervising the front desk (normal hours or events)
- Helping with events Taking photos or videos
- Marketing and communications Taking on a leadership role (projects or Board of Directors)
- Maintaining the Gallery (cleaning / painting / gardening / construction)
- Working with computers (website / social media / graphic design)
- Other skills or interests to volunteer: _____

This form can be completed online at www.gpag.ca/become-a-member, mailed to the address below or dropped off at the Gallery. Information is kept confidential.

Thank you for your support!

For office use only: Payment Date: _____

Payment Type: Cash Cheque Credit/Debit

Receipt No. _____ Data entry

Form revised 21SEP2017