

Les Cheneaux Area Artisan Cooperative Membership Renewal Form

Do you still meet all of Les Cheneaux Area Artisan Cooperative's membership requirements? If so, please sign here:

Read and sign the statement below to indicate your understanding of the rules of membership:

I hereby apply for membership in the Les Cheneaux Area Artisan Cooperative and agree to abide by the Bylaws of said Cooperative, now and/or hereafter in effect, copies of which have been presented to me for my inspection. I agree to pay a 10% commission to the LCAAC for any sales of my work sold directly through LCAAC sponsored events. I also agree to pay annual membership dues of \$25.00 per year.

Signed:

Date:

Please send this form and your annual dues payment

to:

LCAAC

P.O. Box 135

Cedarville MI 49719

Name:

Medium:

Address:

Mailing Address (if different from above):

Phone:

E-mail:

Correspondence is predominantly through e-mail, so please list one that you check regularly!

Business/Gallery/Studio Name:

Website:

Do you use Social Media

(Facebook/Instagram/Twitter, etc.)? If yes, what's your handle?

Accepted ___/___/_____

Board Member Initials: _____