

Active Artist Membership Application for the
INDIANA ARTISTS' CLUB, INC.

Applicant Must Have Been Born In Or Lived in Indiana For The Past Two Consecutive Years

(Please Print Clearly) I, (Mr. Mrs. Ms. Dr.) _____
hereby apply for ACTIVE ARTIST membership in the Indiana Artists' Club, Inc. I was born in
_____. I have lived in Indiana for _____ years. Date of application: _____.

**Applicant's Work Must Have Been Accepted In
Three Different Sponsored Exhibitions (From Three Separate Institutions)**

Please list below, three different approved exhibitions from the last three years in which you have had three different works accepted. Each of the works in those exhibitions must have been chosen by a jury of admissions and must be verified with enclosed catalogs or copies of the catalogues from the exhibitions or copies of juried acceptance letters/notifications. Also, please submit a current résumé. A list of exhibitions, which are approved by the Indiana Artists' Club, is included with this packet.

	NAME OF EXHIBIT	LOCATION	DATE	MEDIUM
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

I understand that I must be sponsored by an active member, in good standing, of the Indiana Artists' Club Inc. I will submit three original works of art, which have been done outside of any class and without instruction or criticism from an art instructor. These works must have been created within the past three years. A favorable approval by the Committee and a Jury upon the submitted works is required before I can become a member. After being notified of my approval, I will be billed \$ 40.00 for my first year membership and regular dues of \$ 25.00 per year thereafter or until dues are changed by the IAC board. If accepted as an active artist member, I pledge to participate in its various functions, such as hosting at exhibitions, entering my work in exhibits, serving on committees and helping to improve the club.

A NOTE FROM THE MEMBERSHIP CHAIRPERSON:

Return this form and the required materials to my address, which appears below. If your application is approved, you will be notified of the place, date and time of delivery of your work for the next review. At the present time, reviews take place in the Fall of each year. If you have any questions, please contact the Chairperson.

Applicant's Address: _____

_____ Nine Digit Zip Code: _____

Telephone (home): _____ Telephone (work): _____

E-mail/website address: _____

Applicant's Signature: _____

Membership Chairperson

Pam Newell
10030 Sea Star Way
Fishers, Indiana 46037.9510
Phone: (317) 842-5513
Fax: (317-842-5513 (call first)
Email: pam@pnewellart.com

*The Applicant is sponsored by this Active member of
Indiana Artists' Club, Inc. in good standing.
Application viable for one (1) year from date listed above.*

Sponsor's Signature: _____

Address: _____

Accepted _____ Not Accepted _____