



# Ottawa West Arts Association

## Membership Application

1 Sep 2018 - 31 Aug 2019

Are you a:	New Member <input type="checkbox"/> Returning Member <input type="checkbox"/>
Name:	
Address:	<i>Street</i>
	<i>City</i>
	<i>Postal Code</i>
Email:	
Telephone:	
Website:	
Your media:	Oil - <input type="checkbox"/> Water - <input type="checkbox"/> Acrylic - <input type="checkbox"/> Mixed Media - <input type="checkbox"/> Photo - <input type="checkbox"/> Photo Art - <input type="checkbox"/> Sculpture - <input type="checkbox"/> Alcohol Ink - <input type="checkbox"/> Other - _____

Do you have computer skills to share?	None - <input type="checkbox"/> Some - <input type="checkbox"/> Advanced - <input type="checkbox"/>
Do you want to be a non-exhibiting member?	Yes - <input type="checkbox"/> No - <input type="checkbox"/>

### STATEMENT OF AUTHENTICITY:

I certify that all artwork to be exhibited is my original work. Copies, studies, kits or works created under instruction in classes & workshops will not be accepted. The Executive & Board of Directors will not be held responsible if the member's works are proven to be fraudulent. All submissions must adhere to the Gallery Exhibiting Standards in the Members Handbook.

### VOLUNTEERING:

I agree to help the Ottawa West Arts Association by volunteering my time and energy as assigned by, agreed with, the OWAA Executive.

### WAIVER:

I release the City of Ottawa, the OWAA and the **owaa gallery** from any responsibility regarding my artwork in the event of fire, theft, loss or damage to my artwork.

### PAYMENT:

Please return this application together with a cheque (or e-transfer) for \$40 payable to OWAA. Mail your payment to our Membership Coordinator, Trudy Daley, 10 Brightside Avenue, Stittsville, Ontario K2S 1K5.

\_\_\_\_\_  
Signature

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Date