

Asociacion de Artes

Membership Application

Name: _____

Baja Address: _____

Baja Phone: _____

Cell Phone: _____

Northern Address: _____

Email Address: _____

Membership Level: Supporting _____ Volunteering _____

Normal Times You Come to Baja:

Areas of Interests:

Projects that you most want to be involved with:

Please return via email to: eastcapearts@gmail.com

www.eastcapearts.com