



COLORADO MOSAIC ARTISTS (CMA)
2024 Membership Application - New Membership or Renewal
YOUR COMPLETED APPLICATION MUST ACCOMPANY PAYMENT

Please print

Today's Date _____

Name _____ Business Name _____

How long have you been practicing Mosaic Arts? _____ What types of mosaic materials do like working with? _____

Address _____ City _____ State _____ Zip _____

Phone _____ Email _____ *Contact will be via email unless otherwise noted.*

Optional Web address _____ *A Gallery listing on the CMA website is included with membership.*

Social Media accounts _____

NOTE TO NEW MEMBERS: *Once your form and payment are received, you will get an email with instructions for submitting a mosaic image and other information for the Gallery page on www.coloradomosaicartists.org*

CMA is a nonprofit organization which depends solely on the participation of its members in order to function and achieve its mission of promoting mosaics as a fine art, and the artistic and technical education of its members and the general public. Please check which items you would be interested in:

Mark with a ✓	
	Serve or assist on the Board
	Chair or actively participate in a committee
	Teach a class or demo, host a meeting

Mark with a ✓	
	Plan a tour, program or coordinate guest speaker
	Organize group project (pro bono, fundraiser, etc.)
	Other things I can offer:

CMA wants to hear from you! What would you like to see in ways of activities, workshops, types of exhibits, etc?

MEETINGS & DUES: Our annual dues are **\$50***. Monthly meetings are usually every second Sunday from 1-4PM, with a mix of in-person and Zoom gatherings. Please make your check payable to **Colorado Mosaic Artists** along with your completed application to **Karen Dvorchak, CMA Treasurer** at her address below.

If using **PayPal:** IMPORTANT - **PLEASE USE "SEND MONEY TO A FRIEND"** option to treasurer@coloradomosaics.org. Once your PayPal transaction is complete, send or email your application to the address below.

*Dues are prorated by half after July 1st for the remaining six months at \$25. Student memberships are offered to full time students for \$10/yr. Name of School: _____.

PLEASE CHOOSE ONE:

I am sending check & application by mail to:
 Colorado Mosaic Artists % Karen Dvorchak
 2980 W Long Dr, Unit E, Littleton, CO 80120

I am paying by PayPal.
 Please email completed application to:
karendvorchak@gmail.com Please include your last name,
 new or renewal, and year in subject line:
 (i.e. "Smith – New Member 2024").

Please tell us how you learned about Colorado Mosaic Artists: Renewing Member Internet Search Referred by CMA Member _____
 Other _____

ACKNOWLEDGMENT:

I agree with the terms of this CMA Membership Application.

Signature