



SUBSCRIPTION FORM

Information :

Surname	<input type="text"/>	Name	<input type="text"/>
Address	<input type="text"/>	City	<input type="text"/>
Province	<input type="text"/>	Postal code	<input type="text"/>
Phone	<input type="text"/>	Cell phone	<input type="text"/>
e-mail	<input type="text"/>	Web site	<input type="text"/>

Volunteer

I am available to do volunteer work Yes No

I want to join the Centre d'artistes Voix Visuelle as:

Statuary member: 1 year \$35 2 years \$60

Recognized professional artist in accordance with the rules of the Centre d'artistes Voix Visuelle, meaning a person who has specialized training in an artistic discipline; is recognized as an artist by his/ her peers belonging in the same artistic tradition; dedicates a significant amount of time to his/her art; has presented his/her work or has performed in public; and seeks remuneration for his/her work as an artist.

Associate member: 1 year \$35 2 years \$60

Any person interested in the objectives and the activities of the Centre d'artistes Voix Visuelle.

Sponsor:

I contribute to the amount of:

Student member: 1 year \$20

Payment:

Make your check payable to Voix Visuelle and mail it to the following address:

Le Centre d'artistes Voix Visuelle

67 Beechwood Ave (2nd floor)

Ottawa

Ontario K1M 1L8