

# Clay Guild of the Cascades Membership Application

Please print clearly, especially your email address!

Name(s) \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Studio/fax/other phone \_\_\_\_\_

Email \_\_\_\_\_

Website \_\_\_\_\_

\$ \_\_\_\_\_ Regular Membership \$20

\$ \_\_\_\_\_ Donation to Clay in Education

\$ \_\_\_\_\_ Total enclosed

Check one: \_\_\_renewal or \_\_\_new member

We prefer to use email to correspond. If you absolutely need your information to come to you via US Post Office please check this box: \_\_\_\_\_

Please make check payable to **Clay Guild of the Cascades**. Mail this form and your check to:

**Clay Guild of the Cascades**  
**PO BOX 172**  
**Bend OR 97709**

Thank you!