

Renewing: ____ New: ____ Website Renew: ____ New: ____ Check Date: _____
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Amount: _____

Ohio Plein Air Society

Membership Application

Anyone joining OPAS will receive the benefits of membership through the end of the calendar year in which he or she joins, unless he or she joins after Dec. 1; anyone joining after Dec. 1 will have their dues carried over to the next succeeding calendar year.

_ Print and fill out this form.

_ Your check or money order made payable to OPAS.

_ Mail to: OPAS Treasurer P.O. Box 14926 Columbus, OH 43214

THANK YOU FOR PRINTING LEGIBLY.

Please write your name as you would like it to appear in all OPAS publications.

Name: _____

Address: _____

City: _____ State: _____ Zip _____

Ohio County: _____

Phone: _____ Cell: _____

Email: _____

Personal Website: _____

_____ Preferred painting medium: _____

Please choose one of four Membership levels. Gallery Page is optional.

____ Artist s \$50.00 ____ Sustaining Patron -\$250.00 ____ Lifetime – one-time payment \$500.00

____ Youth/Student - \$15 Enrolled in High School or an Undergraduate in College/University 22 years of age and under.

____ OPAS Website Gallery Page – additional \$25.00 per year **PLEASE NOTE:** the OPAS website exhibits plein air work only. 10 images, bio and link to personal website. Send images sized to 1200 pixels on the longest side to president@ohiopleinairsociety.com

Please allow 10s 14 days for processing. Thank you.