

Membership Form

Our purpose is to promote the art of calligraphy and provide creative educational programs for all skill levels, fostering community united by a shared love of calligraphic arts.

| Full Name* : | | | |
|---|--|---|----------|
| Email* : | | | |
| Address* : | | | |
| City, State, Zip* : | | | |
| Phone* : | | | |
| Birthday (Month : | | | |
| & Day) | (Include if you want to receive a birthday card from the guild.) | | |
| ☐ I am a new member. | | ☐ I am using Zelle to pay. | |
| I am a renewing member updating my contact information. | | am enclosing a check | to pay. |
| Yes, I give permission to use my name, photo, and/or art work on the website and in guild publications. | | Yes, please print my na contact information in t directory provided only members. | he guild |
| ☐ I understand my membership is not active until my dues are paid in full. | | | |

Annual Membership

\$25 | Includes newsletter, monthly meetings, and workshop discount Membership renewals are due by the 1st of July each year and are *not* pro-rated.

Meetings & Workshops

Meetings are held October through June via Zoom. Major workshops are held twice per year.

For more info, contact us at:

Coastal Calligraphers Guild PO Box 48216 Sarasota, FL 34230-5216

https://coastalcalligraphersguild.org





@coastalcalligraphersguild