



Blue Mountain Foundation for the Arts

MEMBERSHIP FORM 2016/17

163 Hurontario Street, PO Box 581
Collingwood, ON L9Y 4E8
www.bmfa.on.ca 705-445-3430

CONTACT INFORMATION: Please advise of any changes to the following information:

Name: _____ Phone: _____
Address: _____ Town: _____
Postal Code: _____ Email: _____

VOLUNTEERING:

I currently volunteer with the BMFA: YES NO
Are you interested in volunteering? YES NO
Tell me more

ARTIST/ARTISAN:

I am an Artist YES Media/Type of work: _____
I would like to be on the BMFA "Artist Profile" website: YES
Please link to my website: _____

BMFA RENEWAL RATES:

Before June 30, 2016 Individual \$45.00 Family/Business \$70.00

I would like to make a donation to the BMFA in the amount of:

The BMFA will issue a tax receipt for all donations of \$20.00 and over. _____

Total _____

PAYMENT:

Cash: Cheque: # _____ (send Payment to 163 Hurontario Street, PO Box 581,
Collingwood, ON L9Y 4E8)

Credit Card payments: Online: www.bmfa.on.ca or by Phone: 705-445-3430