



SIGNATURE MEMBERSHIP APPLICATION

For Active Members of
Colorado Watercolor Society

Signature Name _____
(Printed or typed) As used on watermedia paintings

Address _____

Phone Number _____ E-mail Address _____

Please check the Classification (a or b) under which you qualify. Fill in the remaining blanks:

As an Active Member since _____, I apply for Signature Membership

- a) as a Charter Member
- b) as a Colorado Artist, having been accepted in at least 3 juried watermedia exhibitions, sponsored by CWS or WFWS, within a 10 year period prior to this application:

Dates _____ Exhibition, Name & Place _____

Dates _____ Exhibition, Name & Place _____

Dates _____ Exhibition, Name & Place _____

My dues are current as of _____.

As a Signature Member, I may use the initials CWS after my name on watermedia paintings or use the status in resumes or like documents **ONLY** as long as my dues are current.

Upon confirmation, I will send you an up-to-date resume.

Application Date _____ Signature _____

Board Confirmation _____
Date

Please return this form to: Carla Rouse
2021 Dragoon Court
Castle Rock, CO 80109