



Mailing List Subscription Form

Please indicate what you would like to receive:

_____ E-news – our electronic updates in your email inbox

_____ *Art News*- Our quarterly newsletter in your mailbox

ℵ Individuals, complete Sections A & B

ℵ Organizations, complete Sections A & C

(Complete a separate form for each person in organization who wants to be on the mailing list!)

Section A - Organizations & Individuals

A1. –Primary arts discipline or area of interest

- 1 Dance
- 2 Music
- 3 Opera/Musical Theatre
- 4 Theatre
- 5 Visual Arts
- 6 Design Arts
- 7 Crafts
- 8 Photography
- 9 Media Arts
- 10 Literature
- 11 Interdisciplinary
- 12 Folklife/Traditional Arts
- 13 Humanities
- 14 Multidisciplinary
- 15 Non-Arts/Non-Humanities

Section B – Artist or Individual interested in the arts:

Check one: _____ Artist? _____ Individual interested in the arts?

Name:

Mailing Address:

City/Town:

State:

Zip:

Phone:

Other phone:

Email Address:

Website Address:

Section C - Organization:

(Fill out a separate form for each person in the organization who wishes to be on the mailing list!)

Name of Organization:

Mailing Address:

City/Town:

State:

Zip:

Website Address:

Phone:

Name & title of individual in organization wishing to be on the mailing list:

Email Address of individual wishing to be on mailing list:

Check off ONE option from each box (1 & 2) below:

C1. Organizations ONLY: *Status*

- 02 Organization - Non-Profit
- 03 Organization - Profit
- 04 Government - Federal
- 05 Government - State
- 06 Government - Regional
- 07 Government - County
- 08 Government - Municipal
- 09 Government - Tribal
- 99 None of the Above

C2. Organizations ONLY: *Type of Institution*

- | | |
|--|---|
| <ul style="list-style-type: none"><input type="checkbox"/> 03 Performing Group<input type="checkbox"/> 04 Performing Group –
College/University<input type="checkbox"/> 05 Performing Group –
Community<input type="checkbox"/> 06 Performing Group - Youth<input type="checkbox"/> 07 Performance Facility<input type="checkbox"/> 08 Art Museum<input type="checkbox"/> 09 Other Museum<input type="checkbox"/> 10 Gallery/Exhibit Space<input type="checkbox"/> 11 Cinema<input type="checkbox"/> 12 Independent Press<input type="checkbox"/> 13 Literary Magazine<input type="checkbox"/> 14 Fair/Festival<input type="checkbox"/> 15 Arts Center<input type="checkbox"/> 16 Arts Council/Agency<input type="checkbox"/> 17 Arts Service Organization<input type="checkbox"/> 18 Union/Professional Association<input type="checkbox"/> 19 School District<input type="checkbox"/> 20 Parent-Teacher Organization<input type="checkbox"/> 21 Elementary School<input type="checkbox"/> 22 Middle School<input type="checkbox"/> 23 Secondary School<input type="checkbox"/> 24 Vocational/Technical School<input type="checkbox"/> 25 Other School<input type="checkbox"/> 26 College/University<input type="checkbox"/> 27 Library | <ul style="list-style-type: none"><input type="checkbox"/> 28 Historical Society<input type="checkbox"/> 29 Humanities Council<input type="checkbox"/> 30 Foundation<input type="checkbox"/> 31 Corporation<input type="checkbox"/> 32 Community Service Org<input type="checkbox"/> 33 Correctional Institution<input type="checkbox"/> 34 Health Care Facility<input type="checkbox"/> 35 Religious Organization<input type="checkbox"/> 36 Seniors' Center<input type="checkbox"/> 37 Parks and Recreation<input type="checkbox"/> 38 Government - Executive<input type="checkbox"/> 39 Government - Judicial<input type="checkbox"/> 40 Government - Legislative
(House)<input type="checkbox"/> 41 Government - Legislative
(Senate)<input type="checkbox"/> 42 Media - Periodical<input type="checkbox"/> 43 Media - Daily Newspaper<input type="checkbox"/> 44 Media - Weekly Newspaper<input type="checkbox"/> 45 Media - Radio<input type="checkbox"/> 46 Media - TV<input type="checkbox"/> 47 Cultural Series Organization<input type="checkbox"/> 48 School of the Arts<input type="checkbox"/> 49 Arts Camp/Institute<input type="checkbox"/> 50 Social Service Organization<input type="checkbox"/> 51 Child Care Provider<input type="checkbox"/> 99 None of the Above |
|--|---|