2019 Membership Application



PO Box 26 Lost River WV 26810 304-897-7242 <u>lrac@hardynet.com</u>

Name (Please Print)	
Mailing Address	
City	State Zip Code
Phone #1	Phone #2
Email	
By default, LRAC communications are se tions via postal mail.	ent to members via email. Please check below to receive communica-
I prefer to receive LRAC communication	ons via postal mail.
Member#	Member medium/craft
before the start of the new calendar year- untary. However, members who work 2 dayear's membership fee. Please make che Responsibilities Members should remit 10% of outside a Members should use their own social makes on its own Web site. Members are encouraged to conduct desired.	with a 30% commission of each sale. Early payments—those made—will receive a \$25 discount. Work Days: Clerking in the store is volays during the season will receive a \$50 credit toward the following ecks payable to Lost River Artisans Cooperative sales that are due to referrals from the Co-op. nedia sites to promote the Co-op. The Co-op will link to members' emonstrations at the Co-op but are not required to do so. Board or on one of the standing committees, such as Display, Mem-
Volunteering Please check areas where you will comm	it to volunteering:
() Classes, education and training() Hospitality and special events() Housekeeping during the season	() Maintenance of building and grounds() Sales, displays, and advertising
I understand that I am joining an artist co- tions, and operations is essential to its su	operative and that my participation in its activities, sales, promo- access.
Signature	Date