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Director of Planning  
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Susan Linn

**Orange County Arts Council  
Non-Profit Cultural Organization Application**

Organizational Membership is billed yearly in the month which you joined. Your membership fee is based on your annual budget

- \_\_\_ under \$50,000 the annual Membership Fee is \$60
- \_\_\_ \$50,000- 249,000 the annual Membership Fee is \$120
- \_\_\_ \$250,000- 499,000 the annual Membership Fee is \$200
- \_\_\_ \$500,000- 1,499,000 the annual Membership Fee is \$350
- \_\_\_ over \$1,500,000 the annual Membership is \$450

Contact Name:
Organization Name:
Address:
City: State: Zip:
P (Day): P (Evening):
Toll Free Ph: Fax:
General Email: Website:

**Key Staff Information:**

Please list your key staff members with their titles, contact information and whether they are paid (P) or volunteer (V) staff mem-bers, full time (FT) or part time (PT). Place an asterisk (\*) next to the primary contact person.

Name	Phone	E-mail	P/V	FT/PT

Please check the category that best describes you or your organization

- |   |   |
|---|---|
| <input type="checkbox"/> Artisan Guild, Co-op or Artists' space | <input type="checkbox"/> Arts Center                                    |
| <input type="checkbox"/> Community or Neighborhood Center       | <input type="checkbox"/> Festival or Fair                               |
| <input type="checkbox"/> Film/Media Organization                | <input type="checkbox"/> Foundation                                     |
| <input type="checkbox"/> Gallery                                | <input type="checkbox"/> Historical Society/Historical District or Site |
| <input type="checkbox"/> House of Worship                       | <input type="checkbox"/> Library  |
| <input type="checkbox"/> Museum (other)                         | <input type="checkbox"/> Museum (Visual Arts)                           |
| <input type="checkbox"/> Performing Arts Facility/Presenter     | <input type="checkbox"/> Performing Arts Producer & Presenter           |
| <input type="checkbox"/> Performing Arts Producer/Group/Series  | <input type="checkbox"/> School or College                              |
| <input type="checkbox"/> Service Organization or Club           | <input type="checkbox"/> Other  |

If Other, please describe: \_\_\_\_\_

\_\_\_\_\_

**Member Application: Organization, Page 2**

Briefly describe your organization. Include the organization's purpose. You may attach a brochure or mission statement as well.

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Select the opportunities offered by your organization. Identify the contact person for each.

"X" if offered	Opportunity	Contact Person	Phone
	Outreach		
	Education		
	Residencies		
	Other (describe)		

**Your information will be included on the Orange County Arts Council website.  
Please make sure that your information is correct.**

Check enclosed for \$ \_\_\_\_\_ made payable to: **Orange County Arts Council**

Charge \$ \_\_\_\_\_ to my credit card:  VISA  DISCOVER  M/C  AMEX

Card # \_\_\_\_\_

Expiration date \_\_\_\_\_

3 Digit Security Code (back of card) \_\_\_\_\_

Name on Card \_\_\_\_\_

Signature \_\_\_\_\_

**Would you like to volunteer for Arts Council activities?**

**\_\_\_ YES \_\_\_ NOT AT THIS TIME**

For Office Use Only

Date Received \_\_\_\_\_

Check # \_\_\_\_\_

Amount \_\_\_\_\_

Name on Check \_\_\_\_\_

**Please mail back to:**  
[www.ocartscouncil.org](http://www.ocartscouncil.org)

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