



\$10.00 Application Fee
() Paid

2724 NE Alberta St. Portland, OR 97211
www.sixdaysart.com

Date _____

Membership Application

Applicant Name: _____ Business Name: _____

Address: _____

Phone Number: (day) _____ (eve.) _____

E-Mail: _____ Website: _____

Brief Description of Work: _____

Membership Levels: Please check the level you would like to begin with. You may change your level later on.

- A: \$135.00 per month
0 hours Worked in Store
75% proceeds go to Artist / 25% to Six Days
- B: \$110.00 per month
8 hours Worked in Store
75% proceeds go to Artist / 25% to Six Days
- C: \$75.00 per month
16 hours Worked in Store
75% proceeds go to Artist / 25% to Six Days
- D: \$60.00 per month
20 hours Worked in Store
75% proceeds go to Artist / 25% to Six Days
- E: \$35.00 per month
24 hours Worked in Store
75% proceeds go to Artist / 25% to Six Days

***We require, upon acceptance a \$15 administrative fee, payable to the Artist Liaison or Treasurer.**

Accepted on: _____ **Declined on:** _____ **Pending:** _____

Member #: _____ Key #: _____ Amt. Pd: _____ Date Pd: ____/____/____ Expected Start Date: ____/____/____