



**THE RIDGEWOOD ART INSTITUTE, INC.**  
**Application For Membership**

Please **PRINT** information the way you want it in the catalogue Date \_\_\_\_\_

Members  Mr.  Mrs.

Name :  Mr.  Mrs. \_\_\_\_\_

Last

First

Address \_\_\_\_\_ Phone \_\_\_\_\_

Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail \_\_\_\_\_ Instructor \_\_\_\_\_

Dues

- Student Membership ..... \$30.00 per year
- Individual Membership ..... \$60.00 per year
- Family Membership ..... \$80.00 per year
- Life Membership (single payment)..... \$600.00
- Family Life Membership (single payment) ..... \$800.00
- Permission for class photographs to be used on the website

**Make check payable to The Ridgewood Art Institute and return with this form to:  
Membership Chairman, The R.A.I., 12 East Glen Avenue, Ridgewood, NJ 07450**