

Arts Marketplace

Member Application

Each potential member must complete this form once per year. Financial and household information is kept ***strictly confidential*** and is used for statistical purposes only as requested by our funders.

INSTRUCTIONS:

- 1) Please complete every section of this form.**
- 2) Save it as a Microsoft Word or PDF file with your name in the title.**
- 3) Attach a copy of your most recent artist statement, bio and resume**
- 4) Email it to Theresep@mac.com - or print a hard copy, include artist statement, bio and resume, DVD, CDs and promotional materials, and mail to Arts Marketplace, 40 West Broadway Blvd., Tucson, AZ 85705.**

Personal Information

Name Age Gender
Residential Address City State Zip
Phone Fax email

Artistic Information

Artistic Discipline
Studio or workshop address City State Zip
Phone Fax Mobile
email facebook Linkdin
other electronic social networking

Brief artist statement (6 - 10 words)

Identify any associations, union or trade group you are a member of:

Identify 3 areas you have experience, enjoy & would be willing to share:

For example, 1) creating an electronic postcard to advertise an event, 2) I know facebook inside and out and 3) I have a tip for stretching canvas

1)

2)

3)

Identify 3 areas you want to learn about in the next year or specific goals you have for yourself:

For example, 1) Encaustic 2) How to make a budget I can live with 3) File taxes so I can finally get a return!

1)

2)

3)

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Communication/technology Information

Do you have an email account? yes no Do you own a computer? yes no

If yes, MAC or PC If no, where do you access online information.

Do you have dial up or wireless access at your home?

What computer software you use:

1)

2)

3)

Creative Entrepreneurs

Business Information

Business Name

Business Address City State Zip

Phone Fax email

Brief Business Description

Business Start date Is your business home-based? Do you have a studio? yes no

Brief business description (your elevator pitch or a 1 minute info-mercial)

Identify any business associations, union or trade group you are a member of:

Education

(check only one)

1 – 6 yrs. Grade school

7 – 11 yrs. Grade school

Completed high school

Some College

College degree

Master's degree or high

Ethnicity

(check all that apply)

White

Black

Hispanic

American Indian

Indian

Mexican/Mexican American

Cape Verdian

Asian, Pacific Islander

Other (explain) _____

Household Information

Total number of members living in your household

Number of children

Are you a single head of household?

Do you or anyone in your family work in the creative industry?

If yes, indicate their relationship to you:

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<u>Household Income</u>	<u>Annual Amount</u>
1. Owner's take home income from business (Owner's Draw)	1. _____
2. Your income from employment (other than your art or creative business)	2. _____
3. Income from public assistance	
___ TANF (welfare) ___ Unemployment ___ SSDI ___ SSI	
___ Social Security ___ Other (specify) _____	3. _____
4. Alimony/Child Support	4. _____
5. Income from other household members	5. _____
6. Total Household Income	6. _____

Income Activity

1. Income (revenues) – average monthly	1. _____
2. Net Income (before expenses) – average monthly	2. _____
3. How many hours do you work on your art each week?	3. _____
4. How many hours do you work on the business of your art each week?	4. _____
5. Not counting yourself, how many employees do you have?	5. _____
6. How many hours per week do your employees work? (for example, 2 full time employees = 80 hours)	6. _____
7. Average hourly wage of employees	7. _____

Please tell us how you heard about Arts Marketplace.

Arts Marketplace Membership Fee

\$200 Annual \$225 Bi-annual \$250 Quarterly

Method of Payment

Check enclosed

Credit Card

Name as it appears on credit card

Credit Card Number Expiration Date CCV (3 # code on back)

Card Billing Address State Zip

- I give Arts Marketplace permission to list my name, art and business information in the member resource directory.
- I give Arts Marketplace permission to submit my confidential customer information to funders that require this information to verify that Arts Marketplace provided assistance to me.

Your signature

Date