

MONMOUTH COUNTY ARTS COUNCIL

Arts Partner Membership Application

(Information will also be used for the Membership Directory)

BUSINESS NAME _____

MAILING ADDRESS _____

PHONE _____ FAX _____

E-MAIL _____

WEB SITE _____

CONTACT PERSON _____

BEST DAYS/HOURS FOR CONTACT _____

PARTICULAR INTERESTS OF BUSINESS IN PARTNERING WITH THE MCAC

DESCRIPTION OF YOUR BUSINESS/ARTS EVENTS/PROGRAMS *(No longer than 30 words)*

WHEN ARE EVENTS SCHEDULED? Year round Spring Summer Fall Winter

WHERE DO EVENTS OR PROGRAMS TAKE PLACE? _____

ARE PROGRAMS GEARED TO SPECIFIC GROUPS? *(Children, families, adults, senior citizens)* _____

DO YOU OFFER ARTS EDUCATION PROGRAMS FOR SCHOOLS AND/OR COMMUNITY GROUPS? _____

SPECIAL SERVICES*? AD CC LP LS SL TTY WC

AD = Audio Descriptive; CC = Closed Captioning; LP = Large Print (18 pt. +); LS = Listening System; SL = Sign Language; TTY = Text Telephone; WC = Wheel Chair Accessible

ENCLOSED IS OUR CHECK FOR ARTS PARTNER MEMBERSHIP FOR ONE YEAR *(Make check payable to MCAC)*

- | | | |
|--------------------------|-----------------------------------|----------|
| <input type="checkbox"/> | Small Business (1-10 employees) | \$200.00 |
| <input type="checkbox"/> | Medium Business (11-50 employees) | \$300.00 |
| <input type="checkbox"/> | Large Business (51+ employees) | \$500.00 |

Date _____

PLEASE ENCLOSE BUSINESS BROCHURES OR MEDIA KITS, IF AVAILABLE. THANK YOU.

Return to: Monmouth County Arts Council, 107 Monmouth Street, Suite 3, Red Bank, NJ 07701.