NORTHSTAR WATERMEDIA SOCIETY SIGNATURE MEMEMBERSHIP APPLICATION FORM

Member Name_____

Mailing Address: _____

_____

Email Address: _____

Phone Number: _____

Five Year Period Starting Date: _____**Ending Date:**_____

Points Earned:

In 5 years or less I have earned a minimum of 5 points. I have verification documents to back up my application requirement. I am currently a member.

Quantity Earned	**Categories**	**Point Value Each**	**Total Points** In 5 years or less
[ ]	Received award in the NSWS Membership Show in 5 years	1	____
[ ]	Paintings accepted into Online NSWS Juried Shows in 5 years	1	____
[ ]	Received award in NSWS Juried Show in 5 years	1	____
[ ]	Served in a NSWS Board designated Leadership Role (max. 2 pts)	1	___

[ ] TOTAL POINTS EARNED IN FIVE YEARS OR LESS

Make copies of your verification documents, and after completing this form, send this form along with your verification documents to:

Membership Director

2980 Bent Tree Hills Drive

New Brighton, MN 55112