

**Chaffee Art Center**  
**Application for Juried Membership**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Submitted work:

1. Title:

Medium:

Size:

Price:

2. Title:

Medium:

Size:

Price:

3. Title:

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Size:

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4. Title:

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Size:

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5. Title:

Medium:

Size:

Price:

6. Title:

Medium:

Size:

Price:

If possible, please fill out this form electronically and include it on your CD, with a current artist statement, and resume (optional). Forward CD to Rutland Area Art Association/Chaffee Art Center, or email documents to [info@chaffeeartcenter.org](mailto:info@chaffeeartcenter.org).

Mail to:  
Rutland Area Art Association  
PO Box 1447  
Rutland, VT 05701

Drop off at:  
Chaffee Art Center  
16 South Main Street  
Rutland, VT 05701