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Application for Juried Member Status

OF ATLANTA INC.	riease p	Please print or type in the PDF form			
	Name (as	s you would like it to appear on certificate.)		Date	
Complete and return form	m to: Address	Address			
PSA Accreditation Chair, 361 Navarre Drive Stone Mountain, GA 300	City	City		Zip	
770-469-4616 Nhoneastudio@aol.com	Phone	Email			
I am currently an Assoc Status. I joined in (mo/y		ortrait Society of Atlanta, Inc. and I a	am applying for J urrent.	uried Member	
EXHIBITION COMPON Juried public PSA Exhib	, ,	hree different works accepted and e	xhibited into the	following three	
Name of Exhibit	Location	on Season or Month / Year	Title	of Portrait	
1.					
2.					
3.					
membership years of se	ervice to The Portrait S e describe all of your v	lieve that I have fulfilled the requirer Society of Atlanta. All of my contribu- vork in detail to help evaluate your s Name of Service	tions to the PSA ervice. The inforr	as a volunteer	
Dates of Service (mo/yr)	Committee Chair	(i.e. Exhibition Hanging Committee)		ervice	

Use additional pages if needed.

We appreciate very much the time and effort you have contributed to the PSA. It is through efforts like yours that the PSA has continued to thrive.