

Artist Membership Form

Membership Type

Artist

Personal Details

First Name _____

Last Name _____

Address _____

Work Phone _____

Email _____

Date of Birth _____

Gender _____

Skin Name _____

Community Group _____

Website _____

Phone _____

Work Phone _____

Email _____

Experience

Length of time you have been painting
or otherwise producing Indigenous Art _____Do you have an arts manager or art
gallery that you primarily work with? _____

Do you have an exclusive contract? _____

Are you a member of another group or
association within the indigenous arts
industry? _____Yes No Why do you want to join the Aboriginal
Art Association of Australia? _____

How did you hear about us? _____

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Declaration

I confirm that I am an Aboriginal person or a Torres Strait Islander within the meaning of the Aboriginal and Torres Strait Islander Act 2005 and therewith confirm that I am of Aboriginal or Torres Strait Islander descent or both, that I identify as an Aboriginal person or Torres Strait Islander, or both and that I am recognised as such by my community.

Aboriginal & Torres Strait Islander Not Aboriginal & Torres Strait Islander

Your application will be subject to peer review and may include a phone interview.

Terms and Conditions

By submitting this form, the applicant agrees, if their application is successful, to their name and city/town/community/region and state being published on the website of the Aboriginal Art Association of Australia (AAAA) (aboriginalart.org.au) as an Artist Member. The AAAA will not otherwise publish or distribute the data provided on this form except for the purpose of distribution in order to assess this application.

Completed applications can be:

Scanned and emailed to secretary@aboriginalart.org.au

Posted to: The Secretary, Aboriginal Art Association of Australia, P.O. Box 378 Croydon Park NSW 2133

Faxed to: 02 9716 0304

For enquiries, please contact: The Secretary 0484 000 174