

Artist Credentials

Atlanta Artists Center

Classification

Date

Name: _____

Member _____

Address: _____

Juried Member _____

Merit Member _____

Advanced Merit Member _____

Member of Excellence _____

Phone#: _____

Division: _____

Painting: _____

Sculpture/Crafts _____

Photography _____

Email: _____

Juried Works

Awards

Show and Date	L	R	N	Work Title and Medium	Type

Ten volunteer hours are required for each level.