



**SOCIETY OF CANADIAN ARTISTS  
APPLICATION FOR ELECTED MEMBERSHIP**

**PERSONAL INFORMATION**

First Name:		Last Name:	
Address:		City:	
Province:		Postal Code:	
Telephone:		Email:	
Canadian Citizen: Y/N		Canadian Resident: Y/N	

**ARTWORK LISTING**

Image No.	Title of Work	Medium	Size (In inches) H" x W" x D"	Date Completed
1				
2				
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Please print the desired format of your name that is to be printed on the Elected Status Certificate if you are successful.

**By submitting this application and affixing your signature to it you are:**

**A – confirming that the accompanying works are not copies, derivatives, or based in any way on other copyrighted or published paintings, photographs, or other artistic works; that the works are entirely your work, executed without supervision of an instructor or other person; and completed within three years preceding the application deadline;**

**B – agreeing that all decisions of the jurors are final and cannot be contested.**

Please type the words "I agree to the above regulations as stated by the SCA" and type your full name in the signature line.

Agreement:	
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Signature:		Date:	
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