

OAEA Membership Mail-in Form

Date Submitted _____

New Membership – or - Renewal

First Name _____ Last Name _____ Preferred Pronouns _____

Home Address _____ City _____ State _____ Zip _____

Home County _____

Personal (not school) Email Address _____

Home Phone _____ Work or Cell _____

School District/University _____ Work Site _____

Work Address _____ City _____ State _____ Zip _____

Work County _____

Please Circle Your Region (Refer to bottom right illustration): C E NC NE NW SE SW W

Please check your Division:

Active: Elementary Middle/Jr. High Secondary Supervision Museum Higher Ed (still actively teaching)

Emeritus membership division: Emeritus

Pre-Service membership division: Pre-Service

Associate Membership/OAEA Family Member: Non-voting/not eligible for a division

Membership Fee

- (\$50) Active Art Educator/Teaching Artist/Art Administrator
- (\$50) Associate Friend/Supporter of Art Ed/Non-Art Educator
- (\$30) Emeritus/Retired Art Educator
- (\$30) OAEA Family (Name current or deceased OAEA Member _____)
- (\$30) Full-time College Student (Include a copy of your Student ID)



If you are interested in Lifetime Membership, please see the appropriate form online.

Membership Fee	
Donation to OAEA Foundation	
Write one check for this Total	

Make Check Payable to **OAEA** and mail to:

Ashton Kelly, Membership Chair
1443 Snowmass Rd.
Columbus, OH 43235

Or pay by credit card with PayPal at:

www.ohioarted.com

Questions? Contact: membership@ohioarted.com

Non-Discrimination Clause

OAEA does not and shall not discriminate, nor tolerate harassment, on the basis of race, color, religion (creed), gender, gender expression, age, national origin (ancestry), disability, marital status, sexual orientation, or military status, in any of its activities or operations. These activities include, but are not limited to selection of volunteers, vendors, and provision of services. We are committed to providing an inclusive and welcoming environment for all members.