

Membership Application

Portland Artisans Co-Op Team - PACT

www.portlandartisanscoopteam.org

Last revised January 22, 2018

Applicant Name: _____

Business Name: _____

Address: _____

Phone Number:
(day) _____ (eve.) _____

E-mail: _____

Website: _____

Emergency Contact: _____

Current/previous employment (optional): _____

Briefly describe your art focus: _____

Briefly describe yourself and what you like to do for fun: _____

Reason you want to join PACT: _____

What are your strengths? What are your weaknesses? _____

Membership Levels:

Please check the level you would like to begin with - may be changed anytime with 30 days notice.

- Level 1:**
\$50.00 per month (to help cover regular monthly store costs)
Work in store up to 29.75 hours per month = 4 – 4.25 hour shifts + 3 on call 4.25 hour shifts per month (If needed and available on the schedule, you can schedule a morning and afternoon shift on the same day)
80% proceeds go to Artist / 20% to PACT (to help cover variable monthly store costs)
- Level 2:**
\$75.00 per month (to help cover regular monthly store costs)
Work in store up to 21.25 hours per month = 3 – 4.25 hour shifts + 2 on call 4.25 hour shifts per month
80% proceeds go to Artist / 20% to PACT (to help cover variable monthly store costs)
- Level 3:**
\$100.00 per month (to help cover regular monthly store costs)

Work in store 8.5 hours per month = 2 – 4.25 hour shifts + 0 on call 4.25 hour shifts per month
80% proceeds go to Artist / 20% to PACT (to help cover variable monthly store costs)

□ **Level 4:**

\$125.00 per month (to help cover regular monthly store costs)

Work in store 0 hours per month = 0 – 4.25 hour shifts + 0 on call shifts per month

80% proceeds go to Artist / 20% to PACT (to help cover variable monthly store costs)

□ **Guest Member Program ~ Try It Out:**

a. Three-month contract commitment \$100/month rent + 30% commission payable to AP. At the end of three months there will be the option (by mutual consent) whether to stay and pay for the next three months as regular (see above Levels 1-4) members at the available levels with 20% commission or leave. Please give AP 15 days' notice prior to the end of the three months.

b. During the third month the guest member will have the option to shadow a working shift and attend a member meeting (no vote).

Upon receipt of application, member agreement, artisan will also be required to pay first 5 months rent and last month's rent. If key to store is issued there will be a \$30 key deposit.

Office Use Only:

\$20.00 Application Fee

Paid Date: ____/____/____

Receipt # _____

Acknowledge Jury Acceptance:

Accepted on: _____ **Declined on:** _____ **Pending:** _____

Expected Start Date: ____/____/____

Member #: _____ **Key #:** _____

Key Deposit \$30: _____ **First 5 months & Last month rent Deposit Amount:** _____

Date Paid: ____/____/____