



Alaska  
Bead  
Society

## Membership Application

I would like to join the Alaska Bead Society. I understand that membership is \$40\* for one program year (June 1- May 31). **The contact information I provide will be included on a Membership List that is provided to the ABS Membership and local bead shops biannually.**

Member benefits include engagement with the local beading community through presentations, monthly meetings, field trips, bead retreats, discounts at participating bead shops, and much more. ABS publishes a monthly newsletter, and occasionally conducts online surveys.

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Business Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone number: \_\_\_\_\_

Email: \_\_\_\_\_

Website: \_\_\_\_\_

Birthday Month: \_\_\_\_\_

I understand that ABS may use my name, image, and beadwork in publications such as the ABS email newsletter, Facebook page, and/or website, unless otherwise requested.

My bead specialty/interest is: \_\_\_\_\_

I am interested in the following bead genres:

<input type="checkbox"/> Seed beads	<input type="checkbox"/> Loom beading	<input type="checkbox"/> Kumihimo	<input type="checkbox"/> Beads & metal
<input type="checkbox"/> Lampwork	<input type="checkbox"/> Beading on fabric	<input type="checkbox"/> Bead sculpture	<input type="checkbox"/> Enamel beads
<input type="checkbox"/> Gemstones	<input type="checkbox"/> Beading on animal skin	<input type="checkbox"/> Free form	<input type="checkbox"/> Beads & mixed media
<input type="checkbox"/> Natural materials	<input type="checkbox"/> Stringing	<input type="checkbox"/> Bead crochet	Other: _____
<input type="checkbox"/> Bead embroidery	<input type="checkbox"/> Beads & tatting	<input type="checkbox"/> Resin beads	_____

Please share what aspect of ABS interests you the most: \_\_\_\_\_

Email completed form to [akbeadsociety@gci.net](mailto:akbeadsociety@gci.net) and pay membership fee online at [www.akbeadsociety.org](http://www.akbeadsociety.org) **or** send form and fee by mail to Alaska Bead Society, P.O. Box 242972, Anchorage, AK 99524.

\*Non-prorated

For Treasurer Use	
Payor: _____	<input type="checkbox"/> Cash <input type="checkbox"/> Check No. _____ Date _____