The Virginia Conservation Association
Membership Application & Dues Payment

*Required

*Date: ______________, 20_______                                    * ______

New     *______Renewing

(Name as you would like for it to appear in the Directory—Please indicate if you do not want to be included in the Directory)

*First_____________________________________________

*Last_____________________________________________

*Address:_________________________________________________________________________

*City___________________________________

*State__________________ *ZIP_________________ *Telephone: ( _______ ) ____________________________________

*Email:____________________________________________________   Title:_______________________________________

Organization(s):________________________________________ Webiste:__________________________________

I Identify As:

_____Administrator         _____Conservator          _____Librarian

_____Appraiser            _____Conservation Technician  _____Post Graduate-Intern/Fellow

_____Collector            _____Curator             _____Supporter

_____Collection Mgr./Registrar   _____Framer/Preparator  _____Student

_____Other (Specify)___________________________________________________________________________

Areas of Conservation Expertise:

_____ Objects           _____ Furniture            _____ Paintings

_____ Ethnographic Objects   _____ Frames/Gilded Objects  _____ Painted Surfaces

_____ Archaeological Objects  _____ Textiles      _____ Conservation Science

_____ Architecture          _____ Books and Paper    _____ Preventive Conservation

_____ Sculpture            _____ Photographic Materials  _____ Accept Private Contracts

_____ Other (Specify)__________________________________________________________

Are you willing to be a Disaster Response Volunteer in the event of an emergency? _____

Are you willing to serve as a Mentor?_____ Would you like to have a Mentor?_____

Are you interested in serving on the VCA board in the future? (see website for details) _____

Practicing Conservator/Consultant Conservators Only:

Would you like your contact information included in our website’s VCA Services Directory?_____ 

The Virginia Conservation Association is open to all interested individuals. To become a member, complete this form and return it with your check made payable to VCA for $30 (Regular) or $15 (Student: Enclose a copy of a valid student ID) to the address below. To join online, visit www.virginiaconservationassociation.org.

Application and dues payment must be received by October 15th to ensure inclusion in the VCA Directory.

The Virginia Conservation Association
P. O. Box 7023
Richmond, Virginia  23221