

Copy this form for your records and send completed form to:  
Your society delegate for submission to the next WFWS Exhibition.

# Verification of Artists Qualified for WFWS MASTER Signature Membership

If you have been accepted into eight (8) WFWS Exhibitions, you have now qualified for WFWS "Master" Signature Membership. Acceptances may have been under more than one WFWS society if you have moved or changed society affiliation. This form is to verify your qualification for "Master" Signature Membership. Please list the three (3) that qualified you for Signature Membership, and the five (5) additional that qualify you for "Master" Signature Membership.

## PLEASE PRINT INFORMATION

First & Last Name \_\_\_\_\_

Your full name as you wish it to appear on the certificate

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

City, State & Zip \_\_\_\_\_

Home Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Your Current WFWS Society \_\_\_\_\_

Title of Painting #1 for Signature Status \_\_\_\_\_ Year \_\_\_\_\_

Title of Painting #2 for Signature Status \_\_\_\_\_ Year \_\_\_\_\_

Title of Painting #3 for Signature Status \_\_\_\_\_ Year \_\_\_\_\_

### Accepted Painting #4 for "Master" Signature Status

Year \_\_\_\_\_ Title \_\_\_\_\_

Host Society of Exhibition \_\_\_\_\_

### Accepted Painting #5 for "Master" Signature Status

Year \_\_\_\_\_ Title \_\_\_\_\_

Host Society of Exhibition \_\_\_\_\_

### Accepted Painting #6 for "Master" Signature Status

Year \_\_\_\_\_ Title \_\_\_\_\_

Host Society of Exhibition \_\_\_\_\_

### Accepted Painting #7 for "Master" Signature Status

Year \_\_\_\_\_ Title \_\_\_\_\_

Host Society of Exhibition \_\_\_\_\_

### Accepted Painting #8 for "Master" Signature Status

Year \_\_\_\_\_ Title \_\_\_\_\_

Host Society of Exhibition \_\_\_\_\_

