



200 W . 12<sup>th</sup> St., Waynesboro, VA 22980  
makewaynesboro@gmail.com  
Operated by Jake Johnson Ceramics LLC

### Membership Application

#### Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_ *City State ZIP Code*

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

Why would you like to be a member? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

#### Ceramics Experience and Skills

Website where images of your work can be viewed, if available\*: \_\_\_\_\_

*\*You may also be asked to bring samples of your work or to provide images.*

Please describe experience and training in ceramics:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

#### Disclaimer and Signature

*I certify that my answers are true and complete to the best of my knowledge. If this application leads to membership, I understand that false or misleading information in my application may result in my release. I understand that membership will require adherence to studio rules, to be reviewed prior to signing the membership agreement.*

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