



**Upper Cumberland Arts Alliance Membership Form**

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Zip \_\_\_\_\_ County \_\_\_\_\_ Phone# \_\_\_\_\_

Cell Phone # \_\_\_\_\_ E-Mail Address \_\_\_\_\_

Web-site \_\_\_\_\_

**What are your expectations of UCAA:**

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**\$25.00 Membership fee**

**NEW! \$10 Student Membership fee – Undergraduate**

**Mail fee and form to: UCAA, P.O. 155, Baxter, TN 38544**