

E D U C A T I O N A L I N S T I T U T I O N A P P L I C A T I O N
T O

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P A R T N E R S H I P
O F A M E R I C A

Your school or university is cordially invited to become an Educational Institution Member of The Illustrators' Partnership of America. To accept this invitation, please fill out this application and return it to the address below. Thank You.

DATE: _____

SCHOOL NAME: _____

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Educational Institution membership in the IPA is open to schools and universities that support the field of illustration. Each membership allows the school to receive two educational memberships for faculty, a free copy of IPA videotapes, a subscription to the Illustrator's News and the opportunity to host future panel discussions with the IPA.

FACULTY NAME: _____

AREA OF EXPERTISE: _____

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AREA OF EXPERTISE: _____

PLEASE ENCLOSE TWO SAMPLES OF YOUR WORK WITH THIS APPLICATION.

Educational Institution Membership is \$500.00 annually. The IPA values your support as we value your student's hopes and future in illustration. We look forward to working with you in fostering a bright future for all illustrators.

ENCLOSED IS MY PAYMENT OF \$500.

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845 Moraine Street Marshfield Massachusetts 02050 • Phone/Fax 781-837-9152
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