



# CNYWS 35th ANNUAL MEETING

Saturday, October 7, 2017

**Registration: 8:30 am, coffee & assorted bake goods.**

**Annual Meeting Program: 9am - 5pm**

**Twin Ponds Golf and Country Club, 169 Main St, New York Mills, NY 13417, 315- 736-9303**

Annual Meeting and "Instant Art Show" Chairman, Drayton Jones

Business Mtg. Program, Kathryn Wehrung, President

Guest Artist Demonstration: Internationally acclaimed Workshop Instructor, Julie Gilbert Pollard

Demo Night Friday, October 6, 6 - 8 pm. Pamela V. Lynch, Chair. CNYWS Member Artists Participating

CALL for Reservations: Holiday Inn, Burrstone Rd., Utica, NY, 315-797-2131, 10 rooms reserved through 9-3-17, any room configuration, \$129.00, refer to "Special rate" CNY Watercolor Society.

SATURDAY, all day "Instant Art Show." Associate & Signature members coming to the Annual Mtg. are asked to bring with them a framed painting and a floor easel for the Instant Art Show. Julie Gilbert Pollard, Guest Artist, will critique all the works at the end of the day.

**\* We will raffle a donation from Guest Artist, Julie Gilbert Pollard.**

**REGISTRATION FEE includes: Meeting Registration and Buffet. Unregistered attendees must leave after the Saturday morning Business Meeting. Those who decide to stay for lunch must Register and pay by September 28**

	<u>Before August 28, 2017</u>	<u>After August 28, 2017</u>
<b>Signature Member</b>	<b>\$35.00</b>	<b>\$40.00</b>
<b>Associate Member</b>	<b>\$40.00</b>	<b>\$45.00</b>
<b>Guest</b>	<b>\$40.00</b>	<b>\$45.00</b>

**The Final Post Mark Date to receive your paid Registration form and check is September 28**

Make registration check payable to "CNYWS", and mail check with the form(s) to:

Drayton Jones at 13 Edgewood Pkwy., Fayetteville, NY 13066

E-Mail Drayton - [bjones3@twcny.rr.com](mailto:bjones3@twcny.rr.com)

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You may combine registration fees for both Workshop and Annual Meeting in a single check. Please note the total on the check

REGISTRATION FORM – 2017 CNYWS ANNUAL Mtg., Sat., October 6, 8:30am, Registration & coffee, Mtg. 9am-5pm

Name of Member \_\_\_\_\_ Signature \_\_\_\_\_ Associate \_\_\_\_\_ Nickname on Tag? \_\_\_\_\_

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

Phone # ( ) \_\_\_\_\_ E-Mail \_\_\_\_\_

Are you bringing a painting ? yes no Name of Guest \_\_\_\_\_

FEE ENCLOSED: Signature Member form (on or before 8/28) \$35 \_\_\_\_\_ After 8/28 \$40 \_\_\_\_\_

Associate Member form (on or before 8/28) \$40 \_\_\_\_\_ After 8/28 \$45 \_\_\_\_\_

Guest (on or before 8/28) \$40 \_\_\_\_\_ After 8/28 \$45 \_\_\_\_\_

Total \$ \_\_\_\_\_