

ENDLESS MOUNTAINS QUILT GUILD

MEMBERSHIP APPLICATION FOR MAY _____ TO APRIL _____

PLEASE PRINT CLEARLY!

Name: _____

Address: _____

City/State/Zip: _____

Telephone: (Home) (_____) _____

(Work/Cell/Other): (_____) _____

E-Mail Address: _____

Birthdate (month and day _____ / _____)

I understand and agree that the Athens Methodist Church, Athens, PA is not liable for any injuries or any lost damaged or stolen property suffered by a member of our organization during their use of, or participation in programs on church property and facilities. I further understand and agree that our organization will be held liable for any damage to Athens Methodist Church caused by a member of our organization. I give the Guild permission to use photos of me and my quilts in publicity and on the guild website unless I notify the webmaster.

Signature of Responsible Person: _____

Date: _____

Dues: \$30.00/year:

\$ _____ Cash

\$ _____ Check # _____ (Payable to EMQG)

Total Paid: _____

Give or Mail this form with your payment to:

Jane Watson
3707 Wilawana Road
Sayre, PA 18840
Jtjf2@yahoo.com
607-738-8402