

Hearts and Hands/ECA Quilters' Guild Membership Questionnaire

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____ Birthday (M/D): _____

Phone Number: _____ Cell Phone: _____

Emergency Contact: _____ Phone Number: _____

____ I am new to quilting and would like basic/beginning instructions

____ I have basic quilting knowledge and look forward to learning more skills

____ I am an experienced quilter

____ I have the following talents to share:

____ applique', hand

____ miniature quilts

____ applique', machine

____ foundation piecing

____ color selection

____ English paper piecing

____ crazy quilt

____ dyeing fabric

____ hand quilt

____ wearable art

____ machine quilting

____ quilt design

____ trapunto

____ bag making

____ landscape

____ other _____

I am willing to serve the Guild by:

Serving on a committee or as a chairperson:

____ organizing trips

____ nominating

____ teaching a class

____ quilt show

____ demonstrating a skill

____ by-laws' revision

____ mentoring a new quilter

____ hospitality, library, publicity, community projects or membership

____ other _____

____ As a member of the Hearts and Hands/ECA Quilters Guild and in accordance with the By-Laws of the Guild, I agree to be responsible for the sale of a minimum of 20 tickets for any Hearts and Hands raffle quilt.

Signature: _____ Date: _____