

HEARTS AND HANDS/ECA MEMBERSHIP QUESTIONNAIRE

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone Number: _____ Cell Phone: _____
Email: _____
Emergency Contact Person _____
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 | ____ stained glass technique |
| ____ applique, machine | ____ miniature quilts |
| ____ color selection | ____ foundation/paper piecing |
| ____ crazy quilt | ____ hand dying fabric |
| ____ hand quilting | ____ wearable art |
| ____ machine quilting | ____ photo transfer |
| ____ trapunto | ____ other _____ |

I am willing to serve the Hearts and Hands/ECA Quilters Guild by:

- | | |
|------------------------------|------------------------------------|
| ____ organizing trips | Serving on a team/committee |
| ____ teaching a class | ____ membership |
| ____ demonstrating a skill | ____ quilt show |
| ____ providing refreshments | ____ program planning |
| ____ mentoring a new quilter | ____ publicity |
| ____ other _____ | ____ hospitality |

____ As a member of 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 at least 20 tickets for any Hearts and Hands/ECA raffle quilt.

Signature: _____ Date: _____