

MEMBERSHIP INFORMATION

TITLE (Please circle one), Mr, Mrs, Miss, Ms, (other please add)

FAMILY NAME _____

GIVEN NAME/S _____

ADDRESS _____

SUBURB _____ **STATE** _____ **P.CODE** _____

TELEPHONE _____ **HOME** _____ **MOBILE** _____

WORK _____ **EMAIL** _____

FAX _____ **OCCUPATION** _____

NEXT OF KIN

NAME _____ **PHONE** _____

RELATIONSHIP TO YOU _____

I AM WILLING TO HAVE MY PHONE NUMBER, MOBILE AND EMAIL, ADDED TO A LIST CIRCULATED TO GUILD MEMBERS ONLY PLEASE CIRCLE ONE (YES/NO)

I AM WILLING TO HAVE IMAGES OF MY WORK UPLOADED TO THE GUILD SOCIAL MEDIA PAGES YES/NO

I WISH TO REMAIN ANONYMOUS ON THE GUILD SOCIAL MEDIA PAGES YES/NO

YEAR MEMBERSHIP COMMENCED 20 _____

AGE GROUP (OPTIONAL) 18-29, 30-39, 40-49, 50-59, 60-69, 70-79, 80+ (PLEASE CIRCLE ONE)

AREAS OF INTEREST; e.g TAPESTRY, HARDANGER, CROSS STITCH, CREWEL EMBROIDERY, PLEASE ADD YOURS _____

ANY OTHER COMMENTS