

# ELIQG Membership Form 2023

*Please do not staple forms and checks together.  
Thank you!*

Please fill out below for our mailing/membership database and return with a **\$35** check made payable to: **ELIQG**                      Mail to: **ELIQG PO Box 332 Riverhead, NY 11901**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

YES  NO  *Allow ELIQG to use photos of myself and my quilts to appear in email, web-site and other publications related to the guild.*

_____	New Member	_____	Renewal
_____	Date	_____	Cash/Check #



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