2024 Application for Membership Date:_____

Please print and include this completed form if paying by check.
IF PAYING ONLINE: Go to: https://suncoastwriters.com/join-our-guild

New Member _____ Renewal _____ (please check one)

Name: (please print) _____
Email Address: _____
Mailing Address: _____
_____
Telephone: _____

NOTE: Your name, telephone, and email address will be published in our Membership Roster published online to the members-only, password-protected area of our website.

ANNUAL DUES:
IF PAYING BY CHECK:
Individual Membership: $25.00 made out to Suncoast Writers Guild (SWG).
Family Membership: $40.00 made out to Suncoast Writers Guild.
Mail this completed form and your check to: Membership Chair
P.O. Box 221
Englewood, FL 34295

DONATION: $_____ to **Denny Girard Fund for Young Writers**
$_____ to **SWG Operating Account**

ACTIVITIES: What areas interest you? (Please check all that apply.)
_____ Readers Workshops _____ Poetry Pod _____ Social Gatherings
_____ Long Writers _____ Board of Directors _____ Guild Events

GUILD INFORMATION: Guild bylaws and other policies governing Guild operations and procedures are available on the SWG website: suncoastwriters.com. Guild communications will be sent via email to the email address you provide above.
USE OF INFORMATION POLICY: Members are advised that participation in the Guild and its activities may result in the use of their name/picture/likeness in Guild publications, i.e., newsletter, meeting minutes, publications, SWG website, etc. The member agrees to hold harmless the Suncoast Writers Guild, its officers, and members for any such use of the member's name/picture/likeness/other identifying information and voluntarily submitted intellectual property. By signing this form, you have read and agree to the above Use of Information Policy.
Signature: _____

Revised: 11/2023