



PRIDE OF THE PRAIRIE QUILTERS 2024 MEMBERSHIP FORM

Check one below

- | | | |
|---|---|--|
| <input type="checkbox"/> Renewing member
<i>Complete name and any changes</i>
\$30.00 | <input type="checkbox"/> Information change
<i>Paid – Existing Member</i>
No Charge | <input type="checkbox"/> New member
<i>Complete entire form</i>
\$30.00 (March – Feb)
\$15.00 (Oct –Feb) |
|---|---|--|

**Completed form and check payable to *Pride of the Prairie Quilters* must be received in person at the *Membership table* or mailed with a postmark dated no later than *February 29, 2024*.
*Pride of Prairie PO Box 501 Plainfield, IL 60544***

PLEASE PRINT CLEARLY

Date: _____

Last Name: _____ First Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Home Mobile (circle type)

Birthday (month/date): _____

NOTE: if you choose to receive your newsletter by postal mail, there is an extra \$15 annual charge to cover the cost for printing and postage. Otherwise, the newsletters are distributed via email.

Please circle your choice: Email Postal Mail (extra \$15 annual charge)

FOR MEMBERSHIP COMMITTEE USE ONLY

Membership dues/fees paid: Date: _____ Amt: \$ _____ Chk#: _____ Cash:\$ _____

Additional Newsletter Mailing Fee Paid: Amt: \$ _____

Membership List Updated Date: _____ New Member Packet Prepared Date: _____ Newsletter Editor Notified Date: _____ Member Name Tag Prepared Date: _____ Program Committee Notified Date: _____