

The Crazy Quilters' Guild, Inc.
MEMBERSHIP REGISTRATION FORM
July 1, 2025 – June 30, 2026

For Membership Use Only:
__ Added to Gmail Database
__ Sent Welcome email
__ Notified Webmaster
__ Update and post membership list
__ Update monthly sign-in lists

Please print clearly:

Name: _____

Membership Type: **NEW** _____ **RENEWAL** _____ **Not Renewing** _____

- If NEW, please complete all of the following information.
- If RENEWAL, complete ONLY any changes from previous year, Date of Birth field.
- If *Not Renewing*, we'd appreciate feedback on reasons why. Please send email to mukwonagocrazyquilters@gmail.com

Address _____

Phone: _____ Landline / Cell
Circle One

Alt Phone: _____ Landline / Cell
Circle One

Date of Birth (month and date): _____

Email Address: _____

Make checks payable to: **THE CRAZY QUILTERS' GUILD, INC.** Annual Dues: **\$24.00**

Payment due on or before July 9, 2025; postmarked no later than July 3, 2025.

Please mail completed form with payment, to:

LuAnne Pankowski
2430 E. Whittaker Ave.
St. Francis WI 53235

Completed forms and payment can also be handed in to Membership Committee at meeting.

Any questions, please text or call LuAnne at 414-416-8322

To be completed by Membership Committee - Check #: _____ Cash _____
Received _____ / _____ / _____