

Pioneer Quilters' Guild

2027 Membership Form

All personal information provided is for Guild use only and not shared with any other entity.

Name:		
☐ Check here if ALL of the following information has not changed (then feel free to leave it blank).		
Address:		
City:	State:	Zip code:
Email:		
Telephone:	Mobile:	Birthday (Month/Day):

☐ **Active Member: \$45**
Full membership privileges plus 18
Opportunity Quilt tickets and monthly
newsletter.

☐ **Newsletter Subscriber: \$15**
You will receive a monthly newsletter only. A
\$5 admission fee will be charged to any
newsletter subscriber attending our
general Guild meetings.

☐ **Honorary Member: \$15**
A continual active member for 10+ years
and 80+ years old by January 1, 2027.
Must complete the (separate) Honorary
Membership form.

Payment amount: _____

☐ Cash

☐ Or Check #: _____

The guild cannot function without your help. Your participation is needed; you, your time and your talents are appreciated. Please mark **at least one** or more committees in which you are interested in helping. (A list of job descriptions for all positions is available on our website pioneerquiltersguild.org.)

- | | | | | |
|--|---|--|--|--|
| ☐ Audio/visual | ☐ Get 'Er Done
(GED) | ☐ Mentor Committee | ☐ Programs | ☐ Small Group
Coordinator |
| ☐ Block of the
Month/Mystery Quilt | ☐ Historian | ☐ Mt. Hope Retreat
Support | ☐ Property | ☐ Social
Correspondent |
| ☐ Challenge | ☐ Hospitality | ☐ New Member
Orientation | ☐ Quilt Show
Committee | ☐ Social Media
Committee |
| ☐ Community
Service Committee | ☐ Lincoln Retreat
Support | ☐ Newsletter Editor | ☐ Second Saturday
Sew-social | ☐ Ways and Means
Committee |
| ☐ Free Table | ☐ Membership | ☐ Opportunity Quilt
Production | ☐ Sew & Sew | ☐ Website |

In addition to the above, please list unique skills that you can use to support the guild. Examples: computer/technology, publicity, financial background, instructing classes on quilting techniques, writing, organizational, etc.

By submitting and signing this form, you agree to the following terms:

Attendance

As a member of Pioneer Quilters Guild, you are expected to be actively involved in the activities of the guild and, when at the maximum membership level, to **attend a minimum of five general meetings during the fiscal year**. The Executive Board will review requests for exceptions to this requirement.

Media Release

From time to time, Pioneer Quilters' Guild takes and shares photos of you and your quilts for various guild functions, promotions, (such as during Show & Tell, at scheduled Opportunity Quilt locations, during Retreats and other general settings) for use in print, online and/or on social media. By signing this registration, all members grant the guild the right to use recordings, video, and photographs created during their guild meetings and other functions.

Membership

Membership renewals/payments are accepted at the October, November and December guild meetings OR by mail to the Membership Chair(s) (PO Box 126, Rocklin, CA 95677). All renewals/payments must be received by December 31, 2026. After that date, all openings will be offered to those on the waiting list, if there is one.

Signature: _____

Date: _____

**RELEASE AND WAIVER OF LIABILITY, AGREEMENT NOT TO SUE,
INDEMNIFICATION AND HOLD HARMLESS AGREEMENT**

I HEREBY ASSUME ALL OF THE RISKS OF PARTICIPATING IN ANY and ALL ACTIVITIES of Pioneer Quilters Guild (herein after, Activity). On behalf of myself and my next of kin, heirs and representatives, **I release from all liability and promise not to sue** the Pioneer Quilters Guild, its officers, directors, volunteers and agents (collectively "Guild") from any and all claims, **including, but not limited to, claims of the Guild's negligence**, resulting in any physical or psychological injury (including paralysis and death), illness, damages, or economic or emotional loss I may suffer because of my participation in this Activity, including travel to, from and during this Activity.

I am voluntarily participating in this Activity. I am aware of the risks associated with traveling to/from and participating in this Activity, which include but are not limited to physical or psychological injury, pain, suffering, illness, disfigurement, temporary or permanent disability (including paralysis), economic or emotional loss, and/or death. I understand that these injuries or outcomes may arise from my own or other's actions, inaction, or negligence; conditions related to travel; or the condition of the Activity location(s). **Nonetheless, I assume all related risks, both known or unknown to me, of my participation in this Activity, including travel to and from the Activity.**

I agree to **hold** the Guild and its officers, directors, volunteers and agents **harmless** from any and all claims, including attorney's fees or damage to my personal property that may occur as a result of my participation in this Activity, including travel to, from and during the Activity. If the Guild incurs any of these types of expenses, I agree to reimburse the Guild. If I need medical treatment, I agree to be financially responsible for any costs incurred as a result of such treatment. I am aware and understand that I should carry my own health insurance.

I am 18 years or older. **I understand the legal consequences of signing this document, including (a) releasing the Guild from all liability, (b) promising not to sue the Guild, (c) and assuming all risks of participating in this Activity, including travel to, from and during the Activity.**

I understand that this document is written to be as broad and inclusive as legally permitted by the laws of the State of California. I agree that if any portion is held invalid or unenforceable, I will continue to be bound by the remaining terms.

I have read this document, and I am signing it freely. No other representations concerning the legal effect of this document have been made to me.

Participant Signature: _____

Participant Name (print) _____ Date: _____