



SANTA CLARITA VALLEY QUILT GUILD

RENEWAL _____

MEMBERSHIP FORM -2019

NEW MEMBER _____

ASSOCIATE MEMBER _____

PLEASE PRINT:

LAST NAME: _____ FIRST NAME: _____

ADDRESS _____

CITY: _____ STATE: _____ ZIP: _____

HOME PHONE with AREA CODE: _____ CELL # with AREA CODE: _____

EMAIL ADDRESS _____

****Note: Monthly Newsletters are sent via email to save postage. CHECK IF NEED MAILED *\$5.00 FEE: _____**

BIRTHDATE: (MONTH) _____ (DAY) _____

REQUIRED INFORMATION:

EMERGENCY CONTACT NAME: _____

EMERGENCY CONTACT PHONE: (with Area Code) _____

Permission to Print and/or post photos of you or your quilts: YES _____ NO _____

*****DUES NOW INCLUDE \$20 FOR OUR OPPORTUNITY QUILT -YOU MAY SELL YOUR TICKETS IF DESIRED*****

Annual Dues of \$50.00, or \$45.00 for seniors 62 and older, are due by the FEBRUARY guild meeting. *Dues must be paid by March 1 to be included in the 2019 directory!!*

***ASSOCIATE dues are \$50.00 (ASSOCIATE MEMBERS -\$70) includes an ad for 1 year in the newsletter.**

Please bring or mail the COMPLETED FORM with a check payable to SCVQG or with cash.

AMOUNT PAID: _____ CASH: _____ CHECK #: _____

SIGNATURE: _____ DATE: _____