



SANTA CLARITA VALLEY QUILT GUILD

MEMBERSHIP FORM – 2026

Mail to: PO Box 802863 Santa Clarita, CA 91380-2863

RENEWAL ☐

NEW MEMBER ☐

ASSOCIATE MEMBER ☐

PLEASE PRINT:

LAST NAME: _____ FIRST NAME: _____

☐ *I am RENEWING my membership, and my information has NOT CHANGED from last year.*

ADDRESS _____

CITY: _____ STATE: _____ ZIP: _____

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

EMAIL ADDRESS _____

BIRTHDATE: MONTH _____ DAY _____

EMERGENCY CONTACT NAME: _____

EMERGENCY CONTACT PHONE with AREA CODE: _____

☐ YES ☐ NO Permission to print and/or post photos of you or your quilts

****Note:** Monthly Newsletters are sent VIA EMAIL to save postage.

☐ PLEASE MAIL THE NEWSLETTER TO ME (an extra \$16.00 fee must be paid to cover the postage)

☐ I would like a printed copy of the Membership Directory in addition to the emailed one.

MEMBERSHIP TYPE - Check One:

General Membership

☐ General \$55

☐ Seniors \$50 (age 62 and older)

Dues must be paid by the FEBRUARY
guild meeting.

Business Membership

Includes an ad for 1 year in the newsletter & website.

Dues now include \$20 for our opportunity quilt.
You may sell your tickets if desired.

☐ Associate Members \$70 (voting rights)

☐ Business Partner \$50

You may pay with a check payable to SCVQG. Please mail to the guild's PO box (address at top).

SIGNATURE: _____ DATE: _____

AMOUNT PAID: _____ CASH: _____ CHECK #: _____