

Petaluma Quilt Guild

Membership Application

www.petalumaquiltguild.org

P.o. Box 5334, Petaluma CA 94955

Membership Status
New Member _____
Membership Renewal _____

Membership dues are \$30.00. Membership year is September 1 through August 31.

Please Print Clearly

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____

Birthday (month and day) _____

E-Mail Address: _____

How would you prefer to receive your newsletter?

E- Mail

U.S. Mail

How long have you been interested in quilting? _____

What type of speakers and workshops would you be interested in?

Would you be intersted in seriving on the board? _____

Do you have any special skills or interests you might share with the Guild?
If so, please describe: _____

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• Treasurer's use:	•••••
• Member Name: _____	••••• Make check payable to:
• Cash ___ or Check ___ Ck. No. _____	••••• Petaluma Quilt Guild and mail to:
• Date Received: _____	••••• Petaluma Quilt Guild
•••••	••••• P. O. Box 5334
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