

## Petaluma Quilt Guild Membership Application

## www.petalumaquiltguild.org

PO Box 5334, Petaluma, CA 94955

•	· · ·	ns from September 1 through Augus 0.00 for half a year beginning in Mai	
Date submitted:	•		
Membership Status:	New Member	Membership Renewal	
Name:			
Address:			
		Zip Code:	
Email:			
Cell phone number: _	Home number:		
Birthday (month/day)			
Emergency Contact	Name:	Phone number:	
How long have you bee	n interested in quilting?		
	, programs, workshops wo		
Would you be interested	d in serving on the board o	or working on a committee?	
Do you have any specia	al skills or interests you mi	ght like to share with the guild?	
Please make checks payable to Petaluma Quilt Guild. If mailing		For use by the treasurer:	
application, send to:		Date Received:	
,	L C. ild	Cash Check	
Petaluma Quilt Guild PO Box 5334		Credit Check #	
PO BOX 5354		Cledit Clieck #	

Updated 3/15/23