

**HOMEMAKERS COUNTRY QUILT GUILD
2024-2025 RENEWAL MEMBERSHIP FORM**

\$30.00 Annual Dues payable NOW

(Make Checks Payable to Homemakers Country Quilt Guild)

NAME: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

TOWNSHIP/BORO/COUNTY: _____

HOME PHONE NUMBER: _____ CELL PHONE NUMBER: _____

E-MAIL: _____

HAS YOUR ABOVE ADDRESS, PHONE OR EMAIL CHANGED IN THE LAST YEAR? PLEASE CHECK BELOW –

ADDRESS _____ PHONE NUMBER _____ EMAIL _____

BIRTHDAY: DAY & MONTH _____

MEMBERSHIP (please check)

ACTIVE MEMBER _____ ASSOCIATE MEMBER _____ **30+ YEARS OF MEMBERSHIP** _____

PLEASE LIST OTHER QUILT GUILDS/ASSOCIATIONS TO WHICH YOU BELONG _____

YES _____ or NO _____ I give permission to publish my picture or quilt in the HCQ website or Facebook.

YES _____ or NO _____ I would like to receive a membership card.

YES _____ or NO _____ I would be willing to be a quilt sister.

PAID: Date _____ Cash _____ Check# _____ 30+ Years Free _____

Please return this form and payment (\$30.00) BEFORE April 30th to: Sue Edwards

2116 Old Woods Road

Please make checks payable to Homemakers Country Quilt Guild! Green Lane, PA 18054

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HOMEMAKERS COUNTRY QUILT GUILD EMERGENCY CONTACT INFORMATION

Please include a phone number that is **useable during our meeting.**

YOUR NAME: _____

CONTACT PERSON NAME _____ **PHONE NUMBER** _____

ALTERNATE PERSON NAME _____ **PHONE NUMBER** _____