

# UTAH QUILT GUILD

*"To Encourage, promote and preserve the art of quilt making in Utah"*

## CHAPTER CHARTER FORM - 2018

Date:  Area Rep:

Area:  Phone:

Chapter Name:

Meeting Address

Include Bldg Name:

Day meetings & Time  (If more than one, please list both.)

Night meetings & Time

**Current Chapter Officers:**

**President:**

#1 Name Utah Quilt Guild Member (Area Code) Phone Number Email Address

UQG Memb. Exp. Address City State Zip Code  
Date

**VP or Pres Elect:**

(indicate position) Name (Area Code) Phone Number Email Address

Address City State Zip Code

**Secretary**

Name (Area Code) Phone Number Email Address

**Treasurer**

Name (Area Code) Phone Number Email Address

**Contact Person:**

Name (Area Code) Phone Number Email Address

Address City State Zip Code

**Website:**

**Closed Group?**  **Number of Members**

**Bylaws:** If your group has bylaws, and they are not currently on file with the Utah Quilt Guild, or if you have made revisions to your bylaws, please send a copy with this Chapter Charter form to your Area Representative to be forwarded to the UQG Vice-President.

This Charter should be updated yearly and needs to be received by February 1st of each year. It needs to be sent to your area representative of the Utah Quilt Guild. If your chapter officers change during the year, please submit any changes or updates at that time.

Membership expiration dates available at [www.utahquiltguild.org](http://www.utahquiltguild.org) under Membership Directory.

**A total of three (3) members of your chapter need to be members of the Utah Quilt Guild. #1 being your president listed above.**

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
#2 Name of Utah Quilt Guild Member	Memb.Exp Date	(Area Code) Phone Number	Email Address
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
#3 Name of Utah Quilt Guild Member	Memb.Exp Date	(Area Code) Phone Number	Email Address

**Comments:**