



Mid-Valley Quilt Guild Member Application July 2019 – July 2020

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|-----------------------------|----------------|
| Membership Committee | |
| Use ONLY | |
| Amount Paid _____ | |
| Check #/cash _____ | |
| Date rec _____ | Mail _____ |
| Directory _____ | Name Tag _____ |

PLEASE PRINT YOUR INFORMATION CLEARLY

I am: Renewing : ____ A New Member: ____ I usually attend ____AM ____PM ____ both meeting(s)

Name _____ Contact phone _____

Address _____ City _____ State _____ Zip Code _____

E-mail and/or Website _____

Business Name _____ Print Name in Directory? _____ Y/N

Type of Business _____

Quilt related business Only... Examples: Quilt shop, long arm business, pattern business, etc.

Applications not received by **July 31, 2019 will not appear in the directory but instead will be added monthly, as received, in the Newsletter and in the website directory.

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| Members are encouraged to volunteer to serve on a Committee each year | |
| Committees: | Projects: |
| <input type="checkbox"/> Community Service | <input type="checkbox"/> Bolt to Bed |
| <input type="checkbox"/> Philanthropy | <input type="checkbox"/> State Fair Booth |
| <input type="checkbox"/> Historian | <input type="checkbox"/> Policies & Procedures |
| <input type="checkbox"/> Hospitality | <input type="checkbox"/> Programs |
| <input type="checkbox"/> Library | <input type="checkbox"/> Website |
| <input type="checkbox"/> Membership | <input type="checkbox"/> Publicity |
| <input type="checkbox"/> New Member | <input type="checkbox"/> Quilt Camp – even years |
| <input type="checkbox"/> Newsletter | <input type="checkbox"/> Quilt Show – odd years |
| <input type="checkbox"/> Nominating Committee | <input type="checkbox"/> Small Groups |

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| Members are encouraged to make one comfort quilt each year due during the month of your birthday. Kits are available at all General Meetings. |
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In the box above, place an "S" next to any committee you would be willing to serve on, "C" for chair, "M" for mentor.

WE VALUE YOUR INPUT: Please use the back of this form to share your general comments or suggestions. Please include ideas you have for programs, challenges, and events you would like to see. Do you have any special skills or talents to share? Tell us if you are in a small quilt group and what it is. Can new members join this group? If you would like to be in a small group or start a small group, please include that information on the back of this form. We will attempt to facilitate this.

| | |
|--|-----------------|
| MEMBERSHIP DUE ARE \$30.00 (July 1st thru June 30th) | \$ 30.00 |
| E-mail copies of Newsletter has no charge | \$ 0.00 |
| Paper copy of Newsletter to your home add \$12.00 | \$ _____ |
| Pickup Directory & Membership card at meeting N/C or receive by mail for \$3.00 | \$ _____ |
| Total payment enclosed | \$ _____ |
| Make checks payable to MVQG and mail to Membership Chair at the address below | |

Mail to: MVQG Membership, 6595 22nd Ave N., Keizer, OR 97303
Questions please email: castlejanice9@gmail.com

Website: If new to the Guild website, please choose a password for access. Use both letters and numbers at least 8 characters long. Name _____ Password _____

This section will be forwarded to the Website Chairperson Only.