MEMBERSHIP/INSURANCE PAYMENT

Please complete the information below and submit this form with your check to the SCCQG Tresurer, Diane Bonner, 15619 Ogram, Gardena, CA 90249. Make your check payable to SCCQG.

This form is provided as a "fillable PDF form". The form is set up to automatically calculate your total. Please type in all information as that will help us ensure that your guild is properly credited.

Your Name		
Your e-mail Address		
Your Telephone Number (in		
case we have questions)		
Your Guild Name		
Membership Dues		\$50.00
Number of Guild Members (use your highest membership number during the past year)		0
Insurance Premium - pro-rated by Guild/membership - Remit \$5.25 x number of members		0.00
If you are also paying the \$10 per	certificate fee for "renewal insurance certs" please indicate	
the name of the facility and \$10 or	n each line item below as applicable.	
For Events and other certificates	requested during theyear the appropriate cert fee is	
submitted at that time. Do not in	clude here.	
Name of Venue		
		0.00
		0.00
		0.00
		0.00

Total Fees to Remit

\$50.00