

CRAZY QUILTERS QUILT GUILD

www.crazyquilters.org

Membership Application

For Membership Use Only

- Added to Database
- Sent Welcome Letter
- Included in Newsletter
- Shared with Board
- Stored in Archives

Date of Membership _____

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Preferred Phone No. _____ Birthday (Mo/Day) _____

Email address: _____

Quilting Level - Beginner _____ Intermediate _____ Advanced _____

Please relate some of your employment history or offices held in other organizations.

Please check which committees you would enjoy helping:

- Bus Trips
- Challenge
- Community Service
- Historical
- Hospitality
- Library

- Modern Bee
- Newsletter
- Nominating Committee
- Programs
- Publicity
- Quilters Studio

- Raffle Quilt
- Retreat
- Show & Tell
- Sunshine & Shadows
- Workshops
- Web Page

Would you be interested in serving as an officer of the guild in the future? YES _____ NO _____

Please tell us something about yourself, your family, your hobbies, anything else you'd like to share with the rest of your fellow quilters.
