

**GARLAND QUILT GUILD  
MEMBERSHIP FORM  
2016**

*Membership Fee: \$25.00 payable to Garland Quilt Guild*

(Please print clearly)

MEMBERSHIP NUMBER: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ WORK: \_\_\_\_\_

CELL: \_\_\_\_\_ (If you prefer any # not be published, please do not list it)

BIRTHDAY: MONTH & DAY \_\_\_\_\_

E-MAIL: \_\_\_\_\_

SPOUSE'S NAME: (If applicable) \_\_\_\_\_

Please check any area you may be interested in :

Advertising

Hospitality

Data Base

Library

Finance

Speaker Dinner

Friendship Group

Web

Guest Host

Writing

Other \_\_\_\_\_

Other \_\_\_\_\_

Please list any memberships you have in other quilting guilds:

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Please take to the Membership Table at the Guild meeting or mail to:

Garland Quilt Guild,  
P.O. Box 460625  
Garland, TX 75046-0625  
Attention: Membership Chair

<b>Paid: \$25.00</b> <b>(Official Use)</b>
Check # _____ Cash: _____
Date Received: _____
By: _____

Official Use:    Notebook \_\_\_\_\_      Picture \_\_\_\_\_      Card \_\_\_\_\_