



Member Information

May 1, 2019 – April 30, 2020

- New Member
 Renewing Member

Date: _____

Name: _____

Address: _____

Phone: _____ Email: _____

Birthday: Month: _____ Day: _____

(We do not share our mailing list or email list. We use this information for the Guild Membership Directory, to send our monthly Star Quilters Guild Newsletter, and to send notices regarding seminars or classes sponsored by the Guild.)

I would like to serve on the following committees:

- | | | |
|---|---------------------------------------|-------------------------------------|
| <input type="checkbox"/> Hospitality | <input type="checkbox"/> Newsletter | <input type="checkbox"/> Historian |
| <input type="checkbox"/> Workshops | <input type="checkbox"/> Ways & Means | <input type="checkbox"/> Membership |
| <input type="checkbox"/> Service Projects | <input type="checkbox"/> Publicity | <input type="checkbox"/> Quilt Show |

Emergency Contact Person during Star Quilters Guild Meetings:

Name

Telephone Number

Please return this Member Information form and your money (\$20) to the membership desk or mail it to Jennifer Adams 5929 Brahma Road, Roanoke, VA 24018