

2019 Membership Application
Oroville Piecemakers Quilt Guild, Inc.
P.O. Box 276
Palermo, Ca 95968-0610



Date: _____

Member Number: _____ Birthday: MO/DAY _____

Name: _____

Address: _____

City: _____ Zip Code: _____

Phone: _____ Cell Phone: _____

Email Address: _____

The membership year is January 1st through December 31st. Dues are charged annually and are due on January 1st. If not paid by the guild meeting date in February membership is terminated. To be included in the Roster your membership must be paid by the February General Meeting.

Dues are \$30.00 per year.

Guild meetings are held regularly on the third Thursday of every month. Workshops are held on the first Thursday of every month, unless otherwise notified. A fee is collected for workshops and special classes.

Members are issued a membership card upon receipt of dues each year.

I am especially interested in:

_____ Attending, or teaching workshops and classes for members. (Circle one)

_____ Serving on Committees

_____ Quilting for others

Special Talent or Interest: _____

Other: _____

If you are a new member, please write a Short Quilter's Biography on the reverse side. We want to get acquainted with you and your quilting interests.