

New Member _____ Renewing Member _____ Year 2024-2025

LEBANON QUILTERS GUILD MEMBERSHIP FORM

Please fill in and submit with \$25.00 cash or check. The membership year is August to July.

Dues must be received by the August meeting for inclusion in the membership list.

*Renewal dues paid after the August meeting add the \$5.00 re-instatement fee. (Total \$30.00)

Submit the completed form and payment at a meeting and receive your membership card, OR

Mail to: Barbara Kuhlengel, 5455 Elizabethtown Road, Palmyra, PA 17078.

Include SASE to have your membership card mailed to you or ask for it at the next meeting.

PLEASE PRINT CLEARLY!

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Mobile Phone: _____ Home Phone: _____

Email Address: _____

Birth Date: __/__/____ (Year of birth is not published to the membership list, but it is needed for the game of chance license.)

Emergency Contact: Name _____

Phone: _____ Relationship _____

I agree to abide by and adhere to the By-Laws of the Lebanon Quilters Guild.

Signed: _____

Office Use Only

Date: __/__/____ Membership Card _____

Cash amount _____ Check amount _____ Check # _____