

St. Croix International Quilters
Membership Registration
2016 - 2017

Membership forms must be updated annually.

If you have changes to this information during the year, please notify the membership chairman.

The membership year is from **October 1, 2016 through September 30, 2017.**

Dues are \$20 (\$5 for affiliate members, who are already members of Pine Tree Quilters Guild).

Summer-only Residents – If you want the *Patchwork Press* delivered to your Maine address, please fill in the following dates: I will be in Maine starting: ___/___/___ Leaving Maine: ___/___/___
The usual delivery time for the *Patchwork Press* is the second week of the months of: - Feb, April, June, Aug, Sept, Nov.

Maine Address _____ **Phone** _____

Name _____ Birthday (month & day) _____

Home Address _____

City, State/Province, Zip/Postal Code _____

Home Phone _____ Cell or Work Phone _____

Email _____

Your quilting experience: ___ Beginner, ___ Intermediate, ___ Advanced, ___ Expert

What do you want to learn? Your interests include: (check as many as apply)

___ Hand Quilting ___ Basting ___ Hand Appliqué ___ Machine Appliqué
___ Block of the Month ___ Redwork ___ Embellishing ___ Paper Piecing
___ Hand Piecing ___ Machine piecing ___ Tools/Gadgets ___ Machine Quilting
New Pattern _____ New Technique _____ _____ Other _____

We have lots of ways for members to be involved, so please let us know if you have an interest or experience in any of the following: (check as many as apply)

___ Programs ___ Membership ___ Website ___ Hospitality
___ Special Projects ___ Fund-raising ___ Publicity ___ Historian
___ Biennial Quilt Show ___ Show & Tell ___ Teaching/Demos ___ Officer
___ Other _____ ___ Community Service ___ Quilting Tips

SIGNED _____ **Date** _____

PLEASE COMPLETE, SIGN & RETURN WITH DUES

to Membership Chairman at business meeting or mail to

Joline Cook, St. Croix Int'l Quilters, Membership Chairman, 39 Cranberry Lane, Calais, ME 04619

Please make checks payable to St. Croix Int'l Quilters.

For more information, visit our Website: www.stcroixquilters.com

To be Completed by Membership Committee: Reg _____ Affiliate _____ Renewal _____ New _____

Date received: _____ \$ _____ Cash or Check # _____ Card _____ NMP _____