CHAMBERSBURG QUILT GUILD



Any commendations _____

MEMBERSHIP FORM



Each member must complete an application form.

Membership dues for the coming year, September 1, 2022 to August 31, 2023, must be paid no later than September 1st or membership will lapse.

Checks are made out to the Chambersburg Quilt Guild, can be sent to the membership chairperson:

Roxanna Iser CHAMBERSBURG QUILT GUILD 1059 Marvern Drive E Chambersburg, PA 17202

Please fill in the following information: Name: (MS, MRS, MISS, MR) LAST **Emergency Contact information:** Name______ Phone: ______ Relationship: _____ Name Phone: Relationship: Email: Birthday: _____ Month/day Street, RR# or Box #: City: _____ State: ___ Zip: __ Phone: (______ Cell: Select membership type Single (\$30.00) Family (\$35.00) Junior (\$20.00) (ages 10-17) (Please note that if you choose a family membership, all members must reside at the same address) ______ Are you willing to print your copy of the monthly newsletter from the guild website? Yes_No (www.chambersburgquiltguild.com) I agree /disagree that the Chambersburg Quilt Guild may use my photographs in the COG website. Your signature Have you been in the Military: yes___ no___, Branch _____ for how long____