



CHAMBERSBURG QUILT GUILD MEMBERSHIP FORM

Each member must complete an application form.

Membership dues for the coming year, September 1, 2025, to August 31, 2026, must be paid no later than September 1, 2025, or membership will lapse.

Checks are made out to the **Chambersburg Quilt Guild**, and sent to the membership chair:

Nancy Corcoran
CQG Membership
219 Garman Drive
Chambersburg, PA 17202-3333

Please complete the following information:

Name: (Ms., Mrs., Miss, Mr.) _____

Email: _____ Birthday: (month/day) _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____

Select membership type.

Single (\$30.00) ____ Family (\$35.00) ____ Junior (\$20.00) ____ (ages 10-17)

Honorary (free) ____ members turning 90 (ninety) September 1, 2025, or later.

Please note, 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, or No?

(www.chambersburgquiltguild.com) If **NO, \$10.00 will be added to your membership fee.**

NOTE: Payment may also be made online at payments.chambersburgquiltguild.com. There will be a 3.5% convenience fee automatically added to your payment. **Include a note on your membership form if payment was made online and the payment date.**

I agree/disagree that the Chambersburg Quilt Guild may use my photographs on the CQG website.

Your expectations for the privilege of membership:

- Purchase or sell \$30.00 of raffle quilt tickets,
- Contribute to your choice of community service projects,
- Occasionally assist with committees and/or serve as an officer,
- Read the monthly newsletter for important information.

Your Signature _____