

**Irving Quilt Guild
Membership Application
2017**

Please print information:

Name _____

Address _____

City, State, Zip _____

Telephone Number _____

Birthday: Month _____ Day _____

E-Mail _____

Do you want your e-mail address published in the guild membership book?

Do you want to receive the guild newsletter by e-mail? _____

Is there a special topic you would like to see covered in our Guild meetings?

Is there a particular class you would like to take? _____

Other information about yourself that would be helpful to the guild: _____

For Guild Use:

Membership Number _____

Payment Method _____ Payment Amount _____

If check, check number _____