

**Membership Application/Renewal**

**Capital City Quilter's Guild**

**P.O. Box 35036**

**Juneau, Alaska 99803**

**Membership Application/Renewal form**

**Annual Dues \$35**

**The membership year is October 1<sup>st</sup> through September 30<sup>th</sup>.**

**Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_**

**Mailing Address: \_\_\_\_\_**

**City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_**

**Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_**

**E-Mail: \_\_\_\_\_ Birth Month: \_\_\_\_\_**

**Note: newsletter delivery is by email only!**

**Please check if you are interested in helping with any committees.**

Charity Committee

Education

Friendship Blocks

AWARE Pillowcases

Quilt Show

Shrine Retreat

FUND RAISING

**Comments, ideas, or suggestions:**

**The Treasurer fills out the following box:**

Date: \_\_\_\_\_ Check# \_\_\_\_\_ Initials: \_\_\_\_\_ New/Returning/Renewal

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Date: \_\_\_\_\_ Check# \_\_\_\_\_ Initials: \_\_\_\_\_ New/Returning/Renewal

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