**TRENT VALLEY QUILTERS’ GUILD MEMBERSHIP REGISTRATION 2024-2025**

**Please Check One: Renewal\_\_\_\_\_\_ New Member\_\_\_\_\_\_\_ Paid By: Cheque\_\_\_\_\_\_ Cash\_\_\_\_\_\_ E-Tsf\_\_\_\_\_\_**

**Please complete this entire form, put it in an envelope along with your cheque (made payable to “Trent Valley Quilters’ Guild”) in the amount of $40.00 and mail to the Membership Convener prior to the September meeting. You may also register in person at the September Meeting. If you choose that option please fill out this form & bring with you. We request that all pertinent information on the form be completed to ensure that we have the most updated information (including email addresses).**

**Please fill out the information in CLEAR PRINTED TEXT**

**NAME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CITY: POSTAL CODE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**TELEPHONE: ( \_\_\_\_\_ ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **E- MAIL \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Kindly complete the following as it will help your Executive serve you better in the coming year.**

**Is there a particular workshop you would like to see the guild run?**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Is there a specific topic or speaker that would be of help or interest to you at a monthly meeting?**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**To ensure our Guild remains active, interesting and smoothly run, we need volunteers for our Executive**

**and Convenors. Please indicate which position you might be interested in.**

**President\_\_\_ Vice President\_\_\_ Secretary\_\_\_ Treasurer\_\_\_ Library\_\_\_ Membership\_\_\_**

**Newsletter\_\_\_ Program** **\_\_\_ Workshop\_\_\_ Social\_\_\_ Website\_\_\_**

**I hereby consent to having my personal contact information, as noted above, distributed to the membership ONLY. Such distribution will be by electronic mail.**

**I understand that it is an expectation of membership that I participate in meetings, support committees and our Quilt Show. It is also an expectation that each member contribute to the completion of one Comfort Quilt per year as it is our major charity.**

**Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Please note:**

**Payment can be made by cheque or etransfer. Membership forms and cheque should be mailed to Joan Cohrs**

**at 14656 County Rd 21 Brighton Ont K0K 1H0 and etransfers sent to treasurer@trentvalleyquiltersguild.com**