

**THE BLUE TRIANGLE QUILT GUILD
OF HOUSTON**

P. O. BOX 70543
Houston, TX 77008-9998

Membership Information Form

All guild members must complete this form every year. Membership year is from January 1 to December 31.

Name: _____ Date (mm/dd/yr): _____

Address: _____

City, State, ZIP: _____

Home Phone: _____ Work Phone: _____ Cell Phone _____

E-Mail: _____ Date of Birth(mm/dd): _____

Enclose **\$45** for annual membership: **Circle one: New OR Renew**
Renewing members paying after Jan 31st will be assessed a \$10 late fee

Rec'd: CashApp _____
Mail _____ Mtg _____ Zelle _____
Check#: _____

Cash, Check, CashApp: \$BTQG2000 **OR Zelle:** btqg2020@gmail.com

Checks payable to: **Blue Triangle Quilt Guild
C/O Guild Treasurer
P. O. Box 70543
Houston, TX 77008-9998**

Are you interested in serving on any of the following committees?

____ Audit ____ Community Service ____ Finance ____ Grant
____ Hospitality ____ Library ____ Membership ____ Photo/Historian
____ Public Relations ____ Opportunity Quilt ____ Retreat ____ Website

Please **initial** one of the following:

_____ I authorize the Blue Triangle Quilt Guild the right and permission to reproduce and publish photos of me and my work on their website, in publications, newsletters, and for publicity. All such use shall be for the purpose of promoting, supporting, or otherwise furthering the mission of the Guild.

_____ I do not wish for photos of me or my work to be published by the Guild.

Please note any future programs you would like to have the Guild offer or other ideas for Guild activities. We would be interested in all your suggestions.

Would you be willing to teach a quilt-related skill? Give Brief description.

For Internal Use – Date received (including year): _____

Treasurer _____ Membership _____ Secretary _____ Newsletter _____