

Greater San Antonio Quilt Guild New Member Registration

Name _____

Address _____

City, State, Zip+4 _____

Phone _____ Email _____

Birthday (month and day) _____

Dues

\$20 (regular)

\$15 (senior)

Cash _____

Check # _____

Expiration Date _____

Your membership must be paid up to be included in the directory. Bring this form to Guild meeting or mail to GSAQG, P.O. Box 380522, San Antonio, TX 78268 with your check.

Participation

Please fill out the following section.

1. Would you host an our-of-town guest speaker or workshop teacher? Yes No
Can you provide transportation to and from the airport, restaurant, workshop or meeting? Yes No
2. Would you be willing to serve on the Executive Board (voting positions)? Yes No
3. Would you be willing to chair a committee serve as a committee member?
(non-voting positions) What committee? _____
4. What special or professional skills do you have that might benefit our guild? Listed below are examples.

| | | |
|--|---|---|
| <input type="checkbox"/> Accounting | <input type="checkbox"/> Audio/visual media | <input type="checkbox"/> Desktop publishing |
| <input type="checkbox"/> Education | <input type="checkbox"/> Graphic Design | <input type="checkbox"/> Law |
| <input type="checkbox"/> Management | <input type="checkbox"/> Nonprofit Management | <input type="checkbox"/> Media Relations |
| <input type="checkbox"/> Sales/Marketing | <input type="checkbox"/> Web Design | <input type="checkbox"/> Data Entry |
| <input type="checkbox"/> _____ | <input type="checkbox"/> _____ | <input type="checkbox"/> _____ |
5. Would you like to be in a BEE or start one? Yes No What area of town? _____