

COASTAL PRAIRIE QUILT GUILD OF TEXAS

MEMBERSHIP REGISTRATION

Sept. 1, 2011—August 31, 2012

For Office Use Only:
Date: _____
Check # _____
Check Amount \$ _____

Make checks payable to CPQG of Tx. Complete your registration and pay your dues by the October meeting to be included in the Directory. You may submit this form at a meeting or mail this form with your check to:

CPQG of Tx
PO Box 55
Stafford, Tx 77497

All guild members must complete a new registration form when renewing each year. Membership year is Sept 1 to Aug. 31.

Name: _____

Please Print
Home Phone
C ell Phone
Work Phone

Address: _____

Address
City
State
Zip Code

E-Mail Address: _____

Dues: \$25.00
After March 31 dues are pro-rated for new members only.

	Type of Membership	Birthday ____/____						
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">REGULAR</td> <td style="width: 20px;"></td> </tr> <tr> <td style="padding: 2px;">JUNIOR</td> <td></td> </tr> <tr> <td style="padding: 2px;">BUSINESS</td> <td></td> </tr> </table>	REGULAR		JUNIOR		BUSINESS		: day / month
REGULAR								
JUNIOR								
BUSINESS								

QUILT BEE PARTICIPATION

Are you already participating in a Bee? Yes ____ No ____ If yes, Name of Bee _____

Are you interested in joining a Bee? Yes ____ No ____ Daytime ____ Evening ____ Weekends ____

Are you interested in starting a Bee? Yes ____ No ____ Daytime ____ Evening ____ Weekends ____

AREAS OF INTEREST: Please be sure to complete this section. This information helps our Nomination Committee and Officers to fill openings on our Board and Committees.

1. Would you be willing to serve on the Executive Board? Check possible positions that might interest you.

____ President	____ Recording Secretary	____ Workshop Chair Elect
____ Treasurer	____ VP Programs	____ Program Chair Elect
____ VP Membership	____ Workshop Chair	____ Editor

2. Would you be willing to: Chair a Committee ____ Serve on a Committee ____

3. Check the positions that might interest you. (These are not voting positions.)

____ Activities	____ Advertising	____ Bee Coordination	____ Comforters/Charity Quilts
____ Historian	____ Hospitality	____ Librarian	____ Parliamentary
____ Publicity	____ Quilt Show	____ Retreats	____ Show & Tell
____ Auction	____ Donation Quilt	____ Web Administration	____ Door Prizes
____ Audit	____ Bylaws	____ Nominating	____ AV Equipment
____ Challenges	____ Fabric Swaps	____ Bus Trips	____ Photography

3. Would you host an out-of-town guest speaker or workshop teacher? Yes ____ No ____

4. Can you provide transportation to and from the airport, restaurant, workshop, meeting? Yes ____ No ____

5. On the back of this form (or on a separate piece of paper) please answer the following questions:

A. What suggestions do you have for workshops or lectures:

B. Would you be willing to teach a workshop? Please describe the workshop.

By signing this form you are hereby giving permission for your name to be included in a printed or secure web Directory.

NAME DATE