

Quilters' Connection 2011- 2012 Membership Renewal Form

Name: _____ (as will appear on membership ID)

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Do not print in membership booklet

Email: _____ Do not print in membership booklet

Regular: All Meetings, exhibit in show, take workshops, *Quiltations* by email \$40
(If received after May 31) \$45

Associate: 2 Meetings, exhibit in show, take workshops, *Quiltations* by email \$30
(If received after May 31) \$35

International: Living overseas, exhibit in show, *Quiltations* by email \$40
(If received after May 31) \$45

Student: 2 Meetings, exhibit 1 quilt in show, *Quiltations* by email \$20
(If received after May 31) \$25

Quiltations newsletter by mail \$10

Payment enclosed Cash Check # _____ \$ _____

Please volunteer for one or more of the following committees:

- | | |
|---|---|
| <input type="checkbox"/> Comfort Quilt Projects | <input type="checkbox"/> Newsletter |
| <input type="checkbox"/> Communications | <input type="checkbox"/> Nomination |
| <input type="checkbox"/> Donations | <input type="checkbox"/> Programs |
| <input type="checkbox"/> Get-Away Weekend | <input type="checkbox"/> Quilt Show |
| <input type="checkbox"/> Holiday Boutique | <input type="checkbox"/> Raffle Quilt |
| <input type="checkbox"/> Library | <input type="checkbox"/> Scholarship |
| <input type="checkbox"/> Meetings | <input type="checkbox"/> Sunshine/Caring |
| <input type="checkbox"/> Membership | <input type="checkbox"/> Winter Free Workshop |
| <input type="checkbox"/> Your Special Talents _____ | |

Membership is from September 1 to August 31.

Return completed forms with payment so they are received by May 31 to:

(A-L) Stephanie Laurin 10 Slavin Dr Pelham, NH 03076
(M-Z) Susan Stemporzewski 37 Litchfield Cir Pelham, NH 03076