

**Virginia Consortium of Quilters
2012 Application for Membership**

Name: _____ Phone: () _____

Address: _____

City: _____ State: _____ Zip: _____ - _____

Email address: _____

(By providing my email address I understand that I will receive the newsletter electronically unless I check the box below.)

I wish to receive a *paper copy* of the quarterly newsletter.

Your membership can be paid for multiple years (up to 5 years) with this form. This date will be on your membership card and the mailing label of each newsletter. If dues increase during this period, yours will not.

New Member \$ _____ (Make check payable to "VCQ")

Renewal Amt: \$ _____ (make check payable to "VCQ" and include **SASE**)
(\$20.00 per year up to five years.)

Renewal Members Only: Please enclose with your payment, application and a self-addressed stamped envelope (SASE) for your membership card.

I am a member of a local quilt guild/group: _____
(-list all guilds)

I teach and/or lecture about quilting.

I may be willing to drive others from my area to VCQ meetings.

**Mail to: Betty Blessin, Membership Chairperson
105 E. Church Street
Martinsville, VA 24112**

For Membership Only:	Date Rec'd: _____	Amt: _____	Area: _____
	Ck. No. _____	Exp. Year: _____	
	MCard Date: _____	Name Tag: _____	
	MList: _____	NPacket: _____	