

# Virginia Consortium of Quilters 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.**

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 (Referred by \_\_\_\_\_)

Amt: \$ \_\_\_\_\_ (Make check payable to "VCQ")  
(\$25.00 per calendar year, up to five years only.)

Renewal Amt: \$ \_\_\_\_\_ (make check payable to "VCQ" and include SASE)

(\$25.00 per calendar year, up to five years only.)

***Renewal Members Only: Please enclose this application, your payment, and a self-addressed stamped envelope (SASE) to help defray costs!***

I am a member of a local quilt guild/group: \_\_\_\_\_

(List all guilds)

I teach and/or lecture about quilting. Specialty: \_\_\_\_\_

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

**Mail to:**  
**Faye Hannah**  
**Membership Chairperson**  
**624 Lacy Oak Dr**  
**Chesapeake, VA 23320**

**Questions: [membership@vcq.org](mailto:membership@vcq.org)**

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## For Membership Only:

Date Rec'd: \_\_\_\_\_ CK Dep \_\_\_\_\_; Mem List updated \_\_\_\_\_; Card Sent \_\_\_\_\_

Amt: \_\_\_\_\_

Ck. No. \_\_\_\_\_

Exp. Year: \_\_\_\_\_ New Member Packet: Letter \_\_\_; Name Badge \_\_\_ Card \_\_\_