



# New Braunfels Area Quilt Guild Membership Form 2008

*PLEASE PRINT - YOUR CONTACT INFORMATION WILL BE IN THE ANNUAL DIRECTORY*

NAME \_\_\_\_\_ NEW  RENEWAL

Address \_\_\_\_\_ City/State \_\_\_\_\_ ZIP \_\_\_\_\_

Preferred Phone \_\_\_\_\_ Optional Phone(s) \_\_\_\_\_

E-mail \_\_\_\_\_ Newsltr. by \_\_\_\_\_ mail or \_\_\_\_\_ Email. Birthday Mo. \_\_\_\_\_ Day \_\_\_\_\_

Occupation \_\_\_\_\_ Full-time \_\_\_\_\_ Part-time \_\_\_\_\_ Retired \_\_\_\_\_

**NBAQG DUES \$25.00 per year, payable by Dec. 31, for name inclusion in annual Directory**  
**Dues may be mailed to: NBAQG Treasurer, P.O. Box 310828, New Braunfels, TX 78131**  
**Dues cover the fiscal year from January 1 – December 31**  
**PLEASE PICK UP your membership card & directory at the monthly meeting after you join.**  
*As a Guild member you are encouraged to sell or buy 30 raffle tickets for our biennial quilt show. Next show: July 25-27, 2008*

**PLEASE** take time to fill out the following short questionnaire so that NBAQG can serve your needs and you can add your talents to NBAQG.

- Quilting Level (select one)       Beginner       Intermediate       Advanced
- Preferred techniques       Appliqué       Piecing       Both
- Preferred quilt style       Contemporary       Traditional       Both

**PARTICIPATION:** PLEASE check those areas below where you will be able to lend assistance or have particular expertise, talents, or skills that you can share with NBAQG.

- |                                      |  |
|--------------------------------------|--|
| ___ Accounting                       | ___ Historian/Scrapbooking/Photography |
| ___ Art Work/Graphic Design          | ___ Hospitality/Membership             |
| ___ Computer Skills                  | ___ Newsletter or ___ Web Page         |
| ___ Community Outreach               | ___ Publicity/Media                    |
| ___ Demonstrations/Workshops         | ___ Quilt Show Experience              |
| ___ Guild Library                    | ___ Secretarial skills                 |
| ___ Officer or Committee Chairperson | Other skills _____                     |

**INPUT BELOW for PROGRAM IDEAS – SPEAKERS?**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*For Office Use Only*

Date Received \_\_\_\_\_

Entered to Mailing List \_\_\_\_\_

Paid by: \_\_\_\_\_

Cash \_\_\_\_\_