

# Orillia Quilters' Guild Membership Application

Name: \_\_\_\_\_ New Member \_\_\_\_\_ Renewal \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

The fee is **\$45** payable by cash or cheque to **Orillia Quilters' Guild,  
PO Box 155  
Orillia, Ontario L3V 6J3**

Please circle your response:

**I would like to have my newsletter emailed to me. YES NO**

**Please place a check mark next to any activity you are willing to assist in:**

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Quilt Show Committee | <input type="checkbox"/> Teach a class    | <input type="checkbox"/> Be a Presenter or Do a Trunk Show |
| <input type="checkbox"/> Website              | <input type="checkbox"/> Outreach         | <input type="checkbox"/> Membership                        |
| <input type="checkbox"/> Newsletter           | <input type="checkbox"/> Librarian        | <input type="checkbox"/> Hospitality                       |
| <input type="checkbox"/> White Glove          | <input type="checkbox"/> Workshop/Program | <input type="checkbox"/> make charity quilts               |

**Recommendations for monthly Presenters or Workshops are welcomed. Please list below-**

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**Privacy Policy:** The personal information collected from members of the Orillia quilters within the Guild is only to facilitate and conduct Guild business and to provide an efficient means of communication among members. Orillia Quilters Guild will not send, rent, lend, give or otherwise share information to any external person or organization for the purposes not associated with guild business.

Signature of Member \_\_\_\_\_ Date \_\_\_\_\_

Date Received	cheque	cash