



Hawaii Quilt Guild Membership Application

Make check payable to: Hawaii Quilt Guild
Mail your completed form and payment to:
HQG Membership, P.O. Box 30423, Honolulu, HI 96820

NEW MEMBERSHIP _____ RENEWAL _____
 Single (\$25) Single (\$25)
 Family (\$35) Family (\$35)
 Jan-Jun, \$15 Single/\$25 family (new members only)

Dues are paid annually starting July 1 through June 30 of each year.

NAME _____
ADDRESS _____
CITY _____ ST _____ ZIP _____
TELEPHONE: _____ E-MAIL _____
BIRTHDAY (month/day) _____

If paying for family membership, please include family members' names and Birthdays (month/day):

NAME: _____ BIRTHDAY: _____
NAME: _____ BIRTHDAY: _____
NAME: _____ BIRTHDAY: _____

AREAS YOU WOULD BE WILLING TO PARTICIPATE IN OR ASSIST WITH:

- QUILT SHOW
- BLOCK OF THE MONTH
- NA LIMA ALOHA (COMMUNITY SERVICE)
- AREA QUILTING BEES
- HOLIDAY PARTY
- WOMEN'S EXPO
- SPECIAL PROGRAMS (SPECIFY AREA OF EXPERTISE):

- OTHER (PLEASE PROVIDE DETAILS):

HQG USE ONLY:
CASH: _____ DATE RECEIVED: _____
CHECK: # _____
CHARGE: _____