

**QUILTERS' SEW-CIETY OF REDDING, INC
2022 MEMBERSHIP FORM**

**Please complete and return by mail
or bring to the membership table during a meeting.**

Please Print

NAME: _____

BIRTHDATE: _____

PHONE #: _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

EMAIL: _____

CIRCLE ONE: RENEWAL / NEW / RETURNING / JUNIOR
Year you Joined _____ (Junior 17 & under has No Fee)

DUES: \$30.00 - JANUARY - DECEMBER
\$15.00 - JULY - DECEMBER

MAKE CHECKS PAYABLE TO: QUILTERS' SEW-CIETY OF REDDING

Please check where you are willing to volunteer to help:

- | | |
|--|---|
| <input type="checkbox"/> Refreshments | <input type="checkbox"/> Philanthropic Quilts |
| <input type="checkbox"/> Education Projects | <input type="checkbox"/> Shasta District Fair |
| <input type="checkbox"/> Be a Committee Person | <input type="checkbox"/> Hold an elected office |
| <input type="checkbox"/> Help teach quilting | <input type="checkbox"/> House a guest |
| <input type="checkbox"/> Opportunity Quilt | <input type="checkbox"/> Loan a quilt for display |
| <input type="checkbox"/> Other _____ | |

ANY IDEAS OR SUGGESTIONS FOR FUTURE PROGRAMS?

Mail to: Quilters' Sew-Ciety of Redding, Inc.
Attn: Membership Chair
PO Box 492581
Redding CA, 96003