I give my permission to include my informat	ion in the directory
	For VP membership USE Only
QUILTERS OF ALACHUA COUNTY DAY GUILD	Date Paid
NEW MEMBER REGISTRATION FORM	Check #
Please fill in completely to help us plan better - THANKS	Cash \$
Name	
Address	
City/State/Zip	
Phone Birthday (Mont	
Email	
Signature	
I've been quilting since the year SKILL LEVEL: Be	eginner Intermediate Advanced
CIRCLE IF YOU HAVE EXPERIENCE (EXP) OR INTEREST (INT) I	N THE FOLLOWING:
EXP INT Community Service Quilts EXP IN	IT Secretary
EXP INT Community Outreach EXP IN	IT Treasurer
EXP INT Directory Publication EXP IN	IT Programs
EXP INT Greeter/Hostess EXP IN	IT Publicity
EXP INT Hospitality/Refreshments EXP IN	IT Ways and Means/Fundraising
EXP INT Membership EXP IN	IT Quilt exhibit or show
EXP INT Newsletter EXP IN	T Spreadsheet Software
EXP INT Desktop Publishing or Similar EXP IN	T Website Maintenance
EXP INT Workshop Presenter/Teacher EXP IN	IT Raffle Ticket Sales
CIRCLE IF YOU HAVE INTEREST (INT) IN THE FOLLOWING:	
INT Fabric Arts and Art quilts INT	Embroidery – Machine
INT Miniature Quilts INT	Quilting – Hand (Hoop & Frame)
INT Piecing – Foundation INT	Quilting - Longarm
INT Embroidery – Hand INT	Quilting – Machine
OTHER AREAS OF QUILTING INTEREST	
What offices or committee chairs have you held in other gu	ilds or organizations?
What programs or techniques would you be willing to share with our guild?	
What activities would you like to see our guild involved in?	<del></del>
How did you find out about the guild?	