Brazos Bluebonnet Quilt Guild Membership Form 2017

Membership Forms must be updated annually - both pages. If you have revisions to this information at any time throughout the year, please notify the membership chairman, either at the guild meeting or through email so that we can update your information. Annual dues & updates must be made by the March meeting, for inclusion in the directory.

The annual membership year is from January 1 through December 31. Dues have increased to \$35. Members over 80 years of age (who have been continuous members of the guild for the previous 5 years) are exempt from dues; they become honorary members.

Make checks payable to **BBQG**. Forms and checks should be brought to the January 2017 meeting or mailed to:

BBQG, Attn: Membership, PO Box 9497, College Station, TX 77842

Complete Following: AL	PR	PRINT CLEARLY please					
Date							
Name:							
New Member: Renew	al: Honorary: /	Amt. Paid	СК	CashMO			
Address:							
City, State, Zip:							
Home Phone:	Cell c	or Work Phone:					
(Ple	ease * (star) to indicate you	ir preferred phone nur	nber)				
Email:	l:Birthday (Month & Day)						
I would be willing to particl	<i>ipate</i> in following activities	or committees (pleas	e circle	all that apply):			
Bookkeeping	Care Quilts	Library		Raffle Quilts			
Bee Keeper	Keeper Challenge Contests			Retreats			
Block of the Month	the Month Door Prizes			Scholarships			
Bluebonnet Store	Education/Quilt Demos	Programs/Workshops		Social/Hospitality			
Habitat for Humanity	Brazos Center Window	Publicity		Soldier Squares			
Bus Trips	Historian/Photographer	Sunshine & Shadows		Quilt Shows			
would be willing to <i>chair</i> Committee.							
I am interested in serving a Please circle all that app		′esNo					
President, VP-Program	is, Secretary, Presid	ent-Elect, VP-Men	nbership	, Treasurer			

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Quilt Bee Survey

Name:								
I am currently a member of the following BBQG Bee(s):								
If interested in joining a bee, please indicate your preferences below:								
Location:	Bryan 0	College Station	Other					
Day of Week:	Mon Tue	Wed	_ Thu	Fri	Sat			
Time of Day:	Morning	Afternoon	Night	_				
Meeting Place:	Private Home _	Church or o	community ce	nter				
Suggested Meeting Place:								
Quilting Survey (Please check all that apply)								
lama		- Quilt Admirer	Quilt Coll	ector	Quilt Maker			
		Quilt Judge	_ Quilt Teac	her Lo	ong Arm Quilter			
My skill level is -		- Beginner	Intermediate_	Advar	nced			
My preferred quilt technique is Appliqué Piecing								
My preferred quilt style is Traditional Contemporary								
My preferred method of piecing is Hand Machine								

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My preferred method of quilting is - - Hand ____ Machine ____