## **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 are \$30. 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: ALL MEMBERS!			PRINT CLEARLY please				
Date							
Name:							
New Member: Renew	al: Honorary: A	mt. Paid C	K Cash MO				
Address:							
City, State, Zip:							
Home Phone: Cell or Work Phone:							
(Ple	ease * (star) to indicate you	r preferred phone numb	er)				
Email:Birthday (Month & Day )							
I would be willing to partici	pate in following activities of	or committees ( <b>please</b>	circle all that apply):				
Bookkeeping	Care Quilts	Library	Raffle Quilts				
Bee Keeper	Ceeper Challenge Contests		Retreats				
Block of the Month	Door Prizes	Newsletter	Scholarships				
Bluebonnet Store	nnet Store Education/Quilt Demos		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	as guild officer:Ye <b>ly</b> :	esNo					
President, VP-Program	s, Secretary, Preside	ent-Elect, VP-Membe	ership, Treasurer				

## Brazos Bluebonnet Quilt Guild Membership Form 2017

## **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 \_\_\_\_