



Membership Application Form

- New Membership - \$20
- Renewal - \$15 (Postmarked BEFORE Dec. 1st)
- Late Renewal - \$20 (Postmarked AFTER Nov. 30)
- Member since _____
- Web Advertising - \$30 per calendar year

Please Print Date _____

Name _____

Business Name _____

Address _____

City _____ State _____ Zip _____

Home Phone () _____ Cell Phone () _____

E-mail Address _____

Website _____

Optional Information

Type of quilting machine: _____

Type of work done: Business Hobby Home Décor

Custom Quilts Your own designs Wearable Art

Year you started longarm machine quilting: _____

Are you interested in being a mentor: Yes No

Do you teach longarm machine quilting: Yes No

Please make check payable to **Arizona Longarm Quilters.**

Return entire page with both forms to:

Kathy Schneider
AZLAQ Membership
26656 N. 45 Pl.
Cave Creek, AZ 85331

Membership is non-refundable and non-transferable

| | | |
|--|-----------|-----------|
| Do Not Write In This Box For Official Use Only | | |
| Date Received _____ | | |
| Date Processed _____ | | |
| <input type="checkbox"/> Cash <input type="checkbox"/> Check # _____ | | |
| Total Amount Rec'd. _____ | | |
| Membership | Treasurer | Webmaster |
| | | |



Date _____

- Renewal - \$20 (Postmarked BEFORE 1/1 of new year)
- Late Renewal - \$25 (Postmarked AFTER 12/31)
- New Membership - \$25

Please Print

First Name _____ Middle _____

Last Name _____

AQG Chapter Affiliation(s)

Primary Chapter _____

Additional Chapters _____

Address _____

City _____ State _____ Zip _____

Home Phone () _____ Cell Phone () _____

Phone Preference for Roster (Circle one): Home Cell

E-mail Address _____

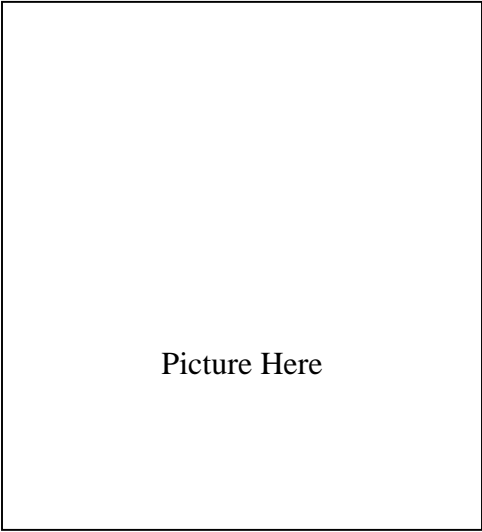
Yes, I can volunteer at AQG events.

Return form to:

Arizona Quilters Guild
2048 N. 44th St., Suite 212
Phoenix, AZ 85008

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| | |
|--|--|
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| Date Received _____ | |
| Date Processed _____ | |
| <input type="checkbox"/> Cash <input type="checkbox"/> Check # _____ | |
| Amount _____ | |



Name: _____

Geographical Location: _____

Machine: _____

Longarm Quilting Since: _____

Areas of Expertise: _____

Quilt for Business or Personal: _____

Awards Won: _____

Background: _____

(Please continue on reverse side)