

**COASTAL PRAIRIE QUILT GUILD OF TEXAS  
MEMBERSHIP REGISTRATION  
Sept. 1, 2017-August 31, 2018**

For Office Use Only:	
Date: _____	
Check # _____	Cash <input type="radio"/>
Amount Paid \$ _____	

Make checks payable to CPQGTX.  
Complete your registration and pay your dues by September 30th to be included in the Directory.  
You may submit this form at a meeting or mail this form with your check to:

**CPQGTX, PO Box 55, Stafford, TX 77497**

**Website: [www.epqgtx.org](http://www.epqgtx.org)**

All guild members must complete a new registration form when renewing each year. Membership year is Sept 1 to Aug. 31.  
**Please Print**

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
Address City State Zip Code

Phone: \_\_\_\_\_  
Primary (Circle One – Home, Cell, Work) Secondary (Circle One – Home, Cell, Work)

E-Mail Address: \_\_\_\_\_

Birthday: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ (month/day)

**Dues: \$35.00**  
After March 31, *dues are pro-rated for new members only.*

April 1-August 31—\$17.50

**Type of Membership**

<b>NEW MEMBER</b>	<input type="checkbox"/>	<b>JUNIOR MEMBER</b>	<input type="checkbox"/>
<b>RETURNING MEMBER</b>	<input type="checkbox"/>	<b>BUSINESS MEMBER</b>	<input type="checkbox"/>

**Volunteer opportunities to serve your guild.** (Indicate where you would be available to assist your guild.)

- Board/Officer   
  Standing Committee   
  Quilt Show Committee   
  On-call support  
 Sponsor a Bee   
  Host a speaker/teacher   
  Provide transportation for a speaker/teacher

*If you have a special interest or idea for a speaker or workshop, please feel free to contact the Program or Workshop Chair Elect with your interest.*

**By signing this form you are hereby giving permission for your name and contact information to be included in a printed or secure web Directory.**

\_\_\_\_\_  
NAME

\_\_\_\_\_  
DATE