LANDRUM QUILTERS—Membership Form – 2019 Landrum Quilters, P. O. Box 396, Landrum, SC 29356.

Please check one: _____ First-time Member _____ Renewing/Rejoining Member Please complete the form below and submit along with your \$20.00 membership dues for 2019. (Make checks payable to "Landrum Quilters".)

Name:		Spouse's first nam	ne:
Address:			
City:	State:	Zip:	
Telephone number:	C	ell Phone number:	
E-mail address:			
Birthday (month & day only):			
I prefer not to have my personal information	n included in t	he on-line directory. (Ple	ase check.)
Date: Amount: Cash	Check #:		