



**Willamette Valley  
QUILTERS**

# MEMBERSHIP FORM

Membership fee is \$50 annually. Membership period is January 1 to December 31.  
Dues will be prorated at \$30 for members joining in August or after.

**(PLEASE PRINT)**

Name \_\_\_\_\_ Home # \_\_\_\_\_  
Address \_\_\_\_\_ Cell # \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
Email \_\_\_\_\_  
Birthday (month/day) \_\_\_\_\_

**\*Membership listings will be for fellow members only.\***

Please rate your quilting experience level:

\_\_\_ Beginner \_\_\_ Intermediate \_\_\_ Advanced \_\_\_ Professional \_\_\_ Long Arm

What type of quilting do you enjoy (modern, traditional, applique, etc)? \_\_\_\_\_

What would you like to learn at WVQ? \_\_\_\_\_

**\*The success of WVQ is dependent on its member's volunteer spirit & participation\***

Check ALL items/activities you are interested in participating in or helping with:

\_\_\_ Programs \_\_\_\_\_ Hospitality  
\_\_\_ Community Service/Charity Projects \_\_\_\_\_ Web site  
\_\_\_ Quilt Show \_\_\_\_\_ Publicity  
\_\_\_ Circles (small interest groups) \_\_\_\_\_ Newsletter  
\_\_\_ Long Arm quilting for charity projects \_\_\_\_\_ Retreats  
\_\_\_ Workshops \_\_\_\_\_ Block of the Month  
\_\_\_ Teaching a class or doing a demonstration on: \_\_\_\_\_

**BRING** this form and payment to the Membership table at a monthly WVQ meeting  
or

**MAIL** to Willamette Valley Quilters, P.O. Box 1468, McMinnville 97128

(over)

## Privacy Policy of Willamette Valley Quilters

Your privacy is important to us. WVQ does not use its database of names and information collected in this form for any purpose other than official Guild business. We do not pass these details to any other organization or person who is not a member of Willamette Valley Quilters.

Your contact information and photo is shared with **members only through the WVQ Membership Directory via email.**

Please initial all information we may include in the official Directory:

\_\_\_\_\_ email  
\_\_\_\_\_ address  
\_\_\_\_\_ phone  
\_\_\_\_\_ photo  
\_\_\_\_\_ birthday month/day

\_\_\_\_\_ I agree not to use information found in the WVQ Directory for personal or business purposes outside of WVQ membership.

\_\_\_\_\_ I give consent for WVQ to use my name &/ or photo in hard copy and on-line publications. (for example, use of Show & Tell pictures of your projects in the newsletter, website & on social media).

Signature \_\_\_\_\_  
Date \_\_\_\_\_

New member/Date \_\_\_\_\_ Ck# \_\_\_\_\_ Cash \_\_\_\_\_ Credit \_\_\_\_\_  
Received by \_\_\_\_\_