





New Member Form	Dues: \$35.00	effective for th	ne year:
DATE:			
First Name	Last Name	e	
Address:	Phone		
Town/State/Zip	none		
EMAIL:		_ Birthday: Month	Day
PHOTOS of me and/or my que to the CHQ website and be put to the CHQ Newsletter and Pr	printed in the CHQ News esident's Bulletin will be	letter : 🗆 Yes 🗆 N	0
(If you do <u>not</u> have email, ched	ck here □)		
Quilting interests/o	ther information	•	
I consider myself a Begin	ner Quilter Intermediate	Quilter Experienced	/Advanced Quilter
I prefer (circle all that apply)	Traditional Quilts Conter	mporary Quilts Art C	Quilts
I am interested in (circle a Applique (Machine / Hand) Other	Embellishments Fabric [		
I am available to attend wor If yes, I prefer a 3 hr worksho	rkshops on Sundays □ Yeop 6 hr workshop	es □ No Either is OK	:
I would be interested in teach	ching a workshop about_		
MAIL TO: Courthouse 08822	Quilters, 203 Main Stre		nington, NJ
CHQ website: www.court courthousequiltersguild@gm	thousequilters.org nail.com	CHQ email:	
This Area is for the Member Paid: Amount: DATE:	ship Committee Check#/Cash	_ Initials	
Membership Card Generated_ Generated	Added to Data	abase	Name Tag