

Beachplum Quilters of the Jersey Shore Guild Membership Application

Today's Date _____

Name _____

Address _____

City, State, Zip _____

Phone _____

E-Mail Address _____

Birthday _____

Method of Payment - Check Number _____ or Cash _____

New or Renewal (please circle one)

I give permission to the Beachplum Quilters Guild for the inclusion of the following information on its website:

(Please check all that apply)

_____Name _____E-Mail _____Photographs/video _____Select All

Turn in this form with Check or Cash at the next meeting or

Mail this form and a **\$30 Check**, payable to "Beachplum Quilters", to: