

FLYING NEEDLES QUILTERS' GUILD
NEW MEMBER INFORMATION FORM

For info: email flyingneedlesyoloco@gmail.com

Membership effective July 1 – June 30 of each year

Name: _____ Date: _____

Address: _____

City, State, Zip: _____

Telephones: Cell: _____ Home: _____

Email: _____

Birthday (month and day only) _____

Please bring completed form to FN General Meeting or send with a \$35 check to:

FNQG

P.O. Box 691 Woodland, CA 95776

Or you can email the form to flyingneedlesyoloco@gmail.com and send \$35 via the PayPal app to @susanlarsen1982 or using your browser [paypal.me/susanlarsen1982](https://www.paypal.me/susanlarsen1982).

Pictures are sometimes taken during events or provided by you to us. If you do not want you or your item photographed tell us at the time photos are being taken.

PLEASE OMIT ANY INFORMATION THAT YOU DO NOT WANT DISCLOSED TO OTHERS. By eliminating email and/or phone information, you will be responsible for obtaining guild information regarding upcoming events, classes, etc. as Flying Needles does not send information through the U.S. Postal Service. Also, please be aware that we are unable to separate our roster to accommodate members not wanting information released to other members. (We are all volunteers handling these tasks with various levels of computer knowledge.)

Flying Needles *cannot guarantee absolutely* that errors will not occur and that your information, including telephone numbers and/or email address might inadvertently be given to other members.

Please sign that you understand our position regarding email and telephone information to our members.

Do you want Flying Needles to give your email and/or telephone information to other members:

Yes No

Please circle one

Signature

To be completed by Membership Chair

Membership Card Number _____

Receipt Number _____

Check # _____ Cash _____ PayPal _____