

St. Croix International Quilters  
**Membership Registration**  
**2023 - 2024**

**Membership forms must be updated annually. Please submit form & dues together. Thanks!**  
If you have changes to this information during the year, please notify the membership chairman.

The membership year is from **October 1, 2023 through September 30, 2024.**  
**Dues are \$30 – US Currency**

Name \_\_\_\_\_ Birthday (month & day) \_\_\_\_\_

Home Address \_\_\_\_\_

City, State/Province, Zip/Postal Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell or Work Phone \_\_\_\_\_

Email \_\_\_\_\_

**Your quilting experience:** \_\_\_\_\_ Beginner, \_\_\_\_\_ Intermediate, \_\_\_\_\_ Advanced, \_\_\_\_\_ Expert

**PLEASE SHARE YOUR IDEAS FOR WORKSHOPS AND CHAPTER PROGRAMS:**

I want to learn how to: \_\_\_\_\_

I would like a workshop for this pattern: \_\_\_\_\_

I would like to teach this workshop: \_\_\_\_\_

Can we use our education fund for this workshop/teacher/activity? \_\_\_\_\_

**We have lots of ways for members to be involved, so please let us know if you have an interest or experience in any of the following:** (check as many as apply)

- |  |  |   |                                      |
|--|--|---|--------------------------------------|
| <input type="checkbox"/> Programs            | <input type="checkbox"/> Membership        | <input type="checkbox"/> Website        | <input type="checkbox"/> Hospitality |
| <input type="checkbox"/> Special Projects    | <input type="checkbox"/> Fund-raising      | <input type="checkbox"/> Publicity      | <input type="checkbox"/> Historian   |
| <input type="checkbox"/> Biennial Quilt Show | <input type="checkbox"/> Show & Tell       | <input type="checkbox"/> Teaching/Demos | <input type="checkbox"/> Officer     |
| <input type="checkbox"/> Other _____         | <input type="checkbox"/> Community Service | <input type="checkbox"/> Quilting Tips  |                                      |

**SIGNED** \_\_\_\_\_ **Date** \_\_\_\_\_

**PLEASE COMPLETE, SIGN & RETURN WITH DUES**  
**to Membership Chairman at a business meeting or mail to: Jude Clark, St. Croix Int'l Quilters,**  
**Membership Chairman, 116 Union St., Calais, ME 04619**  
**Please make checks payable to St. Croix Int'l Quilters.**

For more information, visit our **Website:** [www.stcroixquilters.com](http://www.stcroixquilters.com) and **Facebook Page:** St. Croix Int'l Quilters

**To be Completed by Membership Committee:** Reg \_\_\_\_\_ Affiliate \_\_\_\_\_ Renewal \_\_\_\_\_ New \_\_\_\_\_

Date received: \_\_\_\_\_ \$ \_\_\_\_\_ Cash or Check # \_\_\_\_\_ Card \_\_\_\_\_ NMP \_\_\_\_\_