



## Greater Hartford Quilt Guild Independents Membership Renewal Form

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Street Address: \_\_\_\_\_ City or Town: \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_

Home or Cell Phone Number: \_\_\_\_\_ OK to publish? Yes \_\_\_\_\_ No \_\_\_\_\_

Email address: \_\_\_\_\_

Are you a new member of GHQG? Yes \_\_\_\_\_ No \_\_\_\_\_

Were you a member of a chapter? \_\_\_\_\_ If Yes, which chapter? \_\_\_\_\_

Do you have a quilt related business? \_\_\_\_\_

Name of business \_\_\_\_\_

Dues are \$16.00, please enclose a check made out to GHQG and mail to:

Rosalie Kalisz  
35 Hemlock Drive  
Marlborough, CT 06447