

2025 WARREN COUNTY QUILT GUILD

Membership Form

****Please Note**** If there is any information that you **do not want shared** with the general WCQG membership **do not** fill it in. **Phone numbers and email addresses are the exception.** Please **circle yes or no to share with membership.** They are necessary to have for communications by the Newsletter Leader or in case of cancellation due to inclement weather.

Forms can be turned in at a meeting or mailed to:

Susan Mealy
999 Ward Koebel Road
Oregonia, Ohio 45054

Please print clearly. Please make checks payable to: Warren County Quilt Guild	Warren County Quilt Guild Sue Mealy, Membership
	New <input type="checkbox"/> Renewal <input type="checkbox"/> Membership Number _____

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Share with Membership: yes no

Cell Phone: _____ Share with Membership: yes no

Email Address: _____ Share with Membership: yes no

Birth Month: _____

I acknowledge that I will have access to the WCQG Membership List on the website and I will protect the personal information of the Members as documented in the WCQG Policy Procedure, posted on www.warrencountyquiltguild.com. I have identified or left blank those fields that I do not want shared with membership and agree to receive email communications from our Newsletter Leader. I acknowledge that my email address will be shared with the Newsletter Leader even if I have specified not to share it with the Membership.

Signed: _____ Date: _____

Do Not Write Below This Line:

Amount Paid: _____	Initials: _____	Check _____	Check # _____	Cash _____
Annual dues are \$30.00		NEW Member dues are prorated to \$15.00 (July – December)		