

Hill 'N Hollow Quilters Guild Membership Form

Please print all information clearly. Thank you.

Name _____ Phone Number _____

Address _____ City/State/Zip _____

E-Mail Address _____

(By giving us your e-mail address, you agree to receive the newsletter by e-mail notification and have your address on the roster.)

New Member Renewal Year Joined _____ Birth Month _____

Hill 'N Hollow Quilters Guild depends on the guild members to volunteer to make the Guild run smoothly and to get to know other members. Please check at least three positions/committees you would like to help with:

Officers: President President-Elect Vice President Secretary Treasurer

COMMITTEES

AUDIT	COMMUNITY QUILTS	RAFFLE QUILT	MEMBERSHIP
		Record Keeping	
COMMUNICATION	EDUCATION	Venues	SPECIAL
Newsletter	Programs	Production	President's Quilt
Publicity	Workshop		NW AR EHC Workshop
Photography	In House Classes	HOSPITALITY	
Sunshine and Shadow	Library	Greet/Sign-in	QUILT SHOW
Website	Retreat	Door Prize	
Email	Bus Trips	Refreshment	SHOW AND TELL
Audio-Visual	Guild Challenge		

Please initial your choice below.

_____ I do **not** want Hill 'N Hollow Quilters Guild to use photos or other images of me, along with my name, to be posted on any social media sites.

_____ I give permission to Hill 'N Hollow Quilters Guild to use photos or other images of me, along with my name, to be printed in local newspapers or other print media including, but not limited to, The Baxter Bulletin, Marvelous Magazine and The Stone County Leader.

_____ I give permission to Hill 'N Hollow Quilters Guild to use photos or other images of me, along with my name, to be posted on social media sites including, but not limited to, Facebook.

_____ I understand I may revoke my permission to use photos or other images of me, including my name, to be used, posted or printed on the social media or print media identified above, at any time by communicating my revocation **in writing** to Hill 'N Hollow Quilters Guild.

Signature _____ Date _____

The annual membership fee is \$25.00.

Please make check payable to: Hill 'N Hollow Quilters Guild Mail to: P.O. Box 1005, Mountain Home, AR. 72654

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 Payment Received: Date _____ Amount _____
 Check # _____ If Cash, was receipt given? _____