## COLORADO QUILTING COUNCIL, Inc.

□ New Guild, Quilt Show, or Other Entity Member

Organization Name\_\_\_\_\_

President\_\_\_\_\_

Treasurer \_\_\_\_\_

Secretary \_\_\_\_\_

**Authorized Signature** 

**Membership Level:** 

Organization Mailing Address\_\_\_\_

**Organization Preferred Contact Phone** 

Directors to discipline or expel any member.

with a special article regarding the organization.

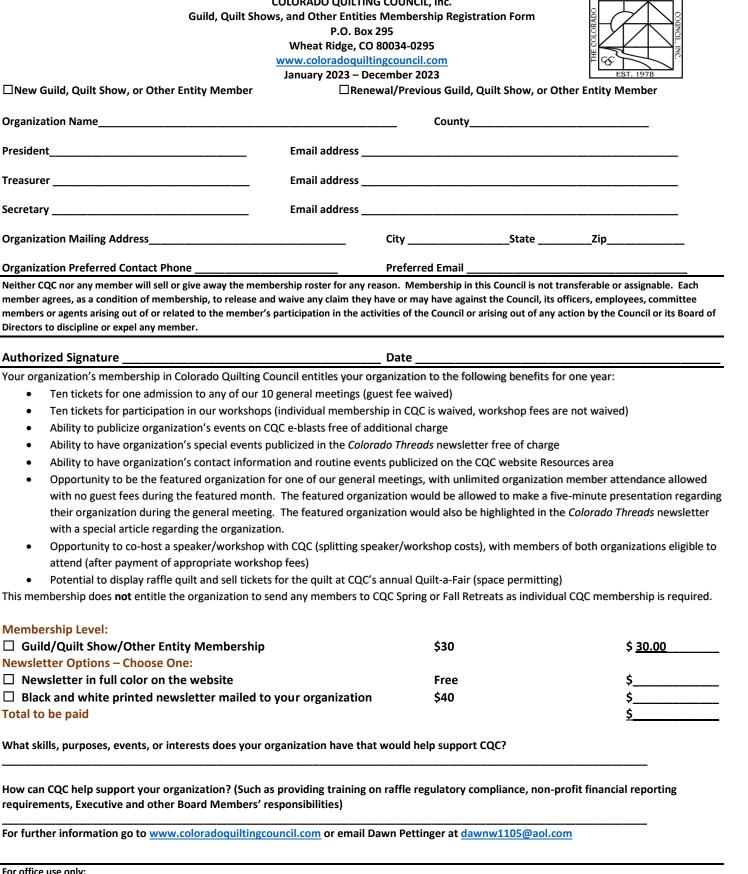
attend (after payment of appropriate workshop fees)

Guild, Quilt Shows, and Other Entities Membership Registration Form

P.O. Box 295

www.coloradoquiltingcouncil.com

January 2023 – December 2023



☐ Guild/Quilt Show/Other Entity Membership **Newsletter Options - Choose One:** ☐ Newsletter in full color on the website ☐ Black and white printed newsletter mailed to your organization Total to be paid What skills, purposes, events, or interests does your organization have that would help support CQC? How can CQC help support your organization? (Such as providing training on raffle regulatory compliance, non-profit financial reporting requirements, Executive and other Board Members' responsibilities) For further information go to www.coloradoquiltingcouncil.com or email Dawn Pettinger at dawnw1105@aol.com For office use only: Date Payment Received Annual Membership Anniversary Date Amount Deposit # Check #\_\_\_\_\_ Credit Card Amount\_\_\_\_\_ Amount\_\_\_\_