



Rebecca's Reel Quilters
Attn: Membership
PO Box 4033
Middletown, NJ 07748
www.rebeccasreel.org

Membership Form

____Renewing Member

____Lapsed Member

____New Member

NAME _____

PHONE NUMBER _____

ADDRESS _____

CITY/ZIP _____

EMAIL _____

Your membership will be valid for the calendar year January 1 through December 31. Dues must be paid by January 31.

Mail your check, payable to RRQ, in the amount of \$50.00 and this form to the address above or bring it to the membership desk at a guild meeting.

I do not wish my information to be included in distribution of the membership list.
Please note that all board members will get lists with full membership information.

Please sign below to grant permission to Rebecca's Reel Quilters to include the following information on the guild website and Facebook page, and to publish photographs of you and/or your quilts in newspaper articles. This permission shall remain in effect unless revoked IN WRITING by you.

(Please check all that apply)

____Name

____E-Mail

____Photographs

____Select All

Name _____

Date _____