**Long Island Quilters’ Society, Inc. Membership Application**

**September 1, 2016 – August 31, 2017**

Annual Dues are $30.00 (cash or check payable to **LIQS**)

|  |  |  |
| --- | --- | --- |
| Name \_\_\_\_\_ | □ New Member |  |
| (For Renewing members: Please include your name on the form and only new or changed information below.) | □ Renewing Member | □ Member of AQS  Member #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

Address

City State Zip

Phone # ( ) Mobile # ( ) Birth date/month: **(Optional – for newsletter announcement)**

E-mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **OR** □ **I do not have an e-mail address** (The LIQS newsletter will be sent via e-mail in pdf format)

Junior Members: Please indicate your sponsor’s name

(Ages 10-17 annual dues are $15.00) (Sponsor must be a current LIQS Member)

**Membership responsibilities include selling two books of tickets for the Opportunity Quilt and working a minimum of two hours at the Convention, which will be held in May 2018.**

Please select one or more of the following activities. You are not being asked to make a firm commitment, but only to be called upon for help if necessary. Remember, joining a committee is one of the best ways to become involved in LIQS

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| \_\_\_\_ | Meeting Photographer | \_\_\_\_ | Library (at meetings) | \_\_\_\_ | LIQS IQ (Quilt) |
| \_\_\_\_ | Sign-in Table (AM meetings) | \_\_\_\_ | Nominating Committee | \_\_\_\_ | Charity Quilts |
| \_\_\_\_ | Sign-in Table (PM meetings) | \_\_\_\_ | Annual Dinner | \_\_\_\_ | Block of the Month |
| \_\_\_\_ | Focus Groups | \_\_\_\_ | Chair a Quilt Show Committee |  |  |
| \_\_\_\_ | Quilting Buddy  (orient new members) | \_\_\_\_ | Membership Workshops  (teaching workshops) |  |  |

Do you have any special expertise which you could share with the Guild?

**Please mail your membership application BEFORE October 1st to:**

**LIQS Membership Chair**

**P.O. Box 1660**

**Mineola, NY 11501-0904**

**Include a check for $30.00 payable to LIQS and a self addressed, stamped envelope. NO REFUNDS**

For Administration Only:

□ Received \_\_\_\_\_\_\_\_\_\_\_\_ Bank \_\_\_\_\_\_\_ Check# Date

□ Card Delivered \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Batch #\_\_\_\_\_\_\_\_\_