



# Edmonton & District Quilters' Guild

**Membership Application Form**  
**Membership Year: September 2023 - August 2024**

- \$70.00 REGULAR MEMBERSHIP:** *Entitled to full benefits of the EDQG including attending all meetings, library privileges, monthly newsletters, voting at the AGM, standing for election and the opportunity to attend any seminars and retreats.*
- \$55.00 SENIOR MEMBERSHIP:** *Same entitlements as regular members; available to members aged 65 years and over.*
- \$55.00 STUDENT MEMBERSHIP:** *Same entitlements as regular members; available to members in full-time attendance at a post-secondary institution. (Include an image of most recent student ID card with this application)*

To request a fee reduction, please go to [www.edqg.ca/membership](http://www.edqg.ca/membership) and complete & submit the Fee Reduction Request form to [membership@edqg.ca](mailto:membership@edqg.ca). Confidentiality is respected.

RENEWAL       NEW MEMBER       PREVIOUS MEMBER

I would like to donate to the University of Alberta EDQG Endowment Fund in the Amount of Donation: \$ \_\_\_\_\_  
Please add this amount to your membership fee. Thank you for your generosity. Receipts will be sent directly from the University of Alberta to you.

**Cheque Enclosed**     **Payment by Square/etransfer/Credit/Debit Card** (please note that service charges will apply for payments by credit card, please contact [membership@edqg.ca](mailto:membership@edqg.ca) for instructions.)

Name \_\_\_\_\_ Contact Info: No Change  or complete below

Address \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

**The objectives of our organization are:** To contribute to the knowledge of and to promote the appreciation of fine quilts; to sponsor and support quilting activities; to encourage quilt making and collecting; and to contribute to the growth of knowledge of quilting techniques, textiles, patterns, history and quilt-makers, through educational meetings, travel and fellowship.

**To meet these objectives requires the skills of all members. Please indicate the area in which you will assist this coming year:**

- Communications**       **Community Services**       **Endowment**       **Library**
- Membership**       **Program**       **Quilt Show**       **Retreats**

## Alberta's Personal Information Protection Act (PIPA)

I **consent** to have my information included on the membership list that is distributed to EDQG members upon request to the board. The provided information will be used for communications from the EDQG such as the newsletter, notice of meetings and events (including retreats, workshops, and any other guild related activities). For more information or if you have questions regarding PIPA, contact [governance@edqg.ca](mailto:governance@edqg.ca).

**Signature** \_\_\_\_\_

Please mail completed form and cheque to:  
Edmonton & District Quilters' Guild  
PO BOX 68004 RPO BONNIE DOON SHOPPING CENTRE  
EDMONTON AB T6C 4N6