



Edmonton & District Quilters' Guild

Membership Application Form
Membership Year: September 2024 - August 2025

- \$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 and complete & submit the Fee Reduction Request form to 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/e-transfer/Credit/Debit Card** (please note that service charges will apply for payments by credit card, please contact membership@edqg.ca for instructions.)

Name _____ **Contact Info: Please complete below:**

Address _____

City _____ Province _____ Postal Code _____

Home Phone _____ Cell _____ Email _____

- If you would like to receive text messages from EDQG please check here.**

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:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> Communications | <input type="checkbox"/> Community Services | <input type="checkbox"/> Endowment | <input type="checkbox"/> Library |
| <input type="checkbox"/> Membership | <input type="checkbox"/> Program | <input type="checkbox"/> Quilt Show | <input type="checkbox"/> 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.

Signature _____

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