Brunswick Quilters 2027 New Member Form

Please Print Clearly

Name: _____

Address: _____

Phone: Home: _____ Cell: _____

Birthday (mm/dd): _____

Email Address: _____

Are **YOU** a Veteran (not your spouse)? Yes No If so, what branch? _____

Dues for new members: $35.00 (includes pin)

*** I understand that Brunswick Quilters is not responsible for any injury or damage to property incurred while participating in activities sponsored by Brunswick Quilters. I also give permission for my likeness and photos of my work to appear on the Brunswick Quilters web site and FB page.

Signature : _____Date: _____

Submit this form along with your dues to the Membership Table during a meeting or mail form to:

Brunswick Quilters, PO BOX 1074, Shallotte, NC, 28459

Paid by Cash_____ Check #_____