

Boundary Bay Quilters' Guild Membership Form 2021/2022

Renewing Member

New Member

Membership Fees: \$50/1 year \$100/2 years

PAYMENT OPTIONS: Cheque/Money Order* E-transfer** Square

*Make your cheque/money order payable to the Boundary Bay Quilters' Guild or BBQG.

**E-transfer to bbqg.tr@gmail.com

MEMBER INFORMATION (PLEASE PRINT CLEARLY)

First Name _____ Last Name _____

Address _____

City _____ Postal Code _____

Home # _____ Cell # _____

E-mail Address _____

MEMBER PARTICIPATION

It takes a village to run a Quilt Guild. Each member is required to volunteer throughout the year and participate in Guild events/committees. If you are interested in helping with a particular group, please indicate your area(s) of interest and your contact information will be provided to the appropriate committee(s):

VOLUNTEER POSITIONS

- | | | |
|---|---|--|
| <input type="checkbox"/> Advertising | <input type="checkbox"/> Archivist | <input type="checkbox"/> Baby Quilts |
| <input type="checkbox"/> Block of the Month | <input type="checkbox"/> Comfort Quilts | <input type="checkbox"/> Education |
| <input type="checkbox"/> Hospitality | <input type="checkbox"/> Library | <input type="checkbox"/> Marketing/Publicity |
| <input type="checkbox"/> Membership | <input type="checkbox"/> Newsletter | <input type="checkbox"/> Photography |
| <input type="checkbox"/> Quilt Show | <input type="checkbox"/> Quilts of Valour | <input type="checkbox"/> Retreats |
| <input type="checkbox"/> Show & Tell | <input type="checkbox"/> Special Events | <input type="checkbox"/> Sunshine |
| <input type="checkbox"/> Website | <input type="checkbox"/> Workshops | <input type="checkbox"/> Zoom Host |

EXECUTIVE POSITIONS

- President Vice President Secretary Treasurer Membership Chair

COLLECTION OF PERSONAL INFORMATION

As a requirement to join the Boundary Bay Quilters' Guild and in accordance with the Personal Information Protections Act of British Columbia any personal information collected or requested on this membership form will be used for the purpose of maintaining the membership list given to the Guild Executive and Committees.

Additionally, the membership list is distributed annually (in October) via e-mail to all our guild members. In the interest of protecting the privacy of our members, we require that members **DO NOT** print copies of this list or share the list with any non-members or organizations. The list will include: names, home addresses, phone numbers, and email addresses.

I AGREE to be on the member distribution list.

Please **exclude:** Address Phone # E-mail Address

I DO NOT AGREE to be on the member distribution list.

Signature _____ Date Signed _____