

Santa Rosa Quilt Guild

AFFILIATE Sponsorship

Today's date: _____

Check #: _____

Is this a Renewal or New Sponsorship

Please PRINT clearly:

Affiliate Business Name: _____

Owner/Operator Name: _____

Business Address: _____

Phone: (____) _____

Hours of Operation: _____

Website and/or blog address:

Email address, if different:

Please send check for \$50.00 made payable to **SRQG**.

To: Membership
Santa Rosa Quilt Guild
PO Box 9251
Santa Rosa, CA 95405

The first year's sponsorship fees are pro-rated:
\$25.00 for joining July 1 through September 30.
\$13.00 for joining October 1 or later.

New Members:

The first Thursday of each month is our business meeting. We would like to invite you to make a 15 minute business presentation at one of these meetings.

My first choice of dates is: _____. My second choice is: _____.
_____ I would rather wait to choose a date and will contact you.

Thank you for supporting our guild!
SRQG Membership Committee

For internal use

Excel	
Roster	