



League of Northern Colorado
 P. O. Box 272593
 Fort Collins, CO 8527
www.lncq.org

Membership Application
 Annual Dues \$25.00
 Jan 1 – Dec 31 Year _____
 New Member Renewal

Name _____ Birth Month/Day _____
 Address _____ Phone _____
 _____ Cell _____
 Occupation _____ Do you have a Quilting Business? _____
 E-mail Address _____

We send directory, newsletters and updated notices by email. Please go to our web site for LNCQ programs and information. Copies will be available at meetings for members who need them.

Please check your areas of interest(s)

- | | | | |
|--------------------------------------------|----------------------------------------|-----------------------------------------|---------------------------------------|
| <input type="checkbox"/> Community Service | <input type="checkbox"/> Exhibits | <input type="checkbox"/> Hospitality | <input type="checkbox"/> Library |
| <input type="checkbox"/> Membership | <input type="checkbox"/> Memoirs | <input type="checkbox"/> Newsletter | <input type="checkbox"/> Programs |
| <input type="checkbox"/> Retreat | <input type="checkbox"/> Show and Tell | <input type="checkbox"/> Small Groups | <input type="checkbox"/> Ways & Means |
| <input type="checkbox"/> Web | <input type="checkbox"/> Workshops | <input type="checkbox"/> Rookie Program | |

Would you be interested in assisting a Committee Chair with a ONE time activity? Yes No

What skills/talents do you have that would help the league? _____

Are you a member of a small group? Yes No Name of group _____

Are you interested in joining a small group? Yes No May we contact you with information? Yes No

*Membership in League of Northern Colorado Quilters (LNCQ) runs from January 1 to December 31 of each calendar year. To be included in the current roster, dues must be received before December 31 of each year. As a member you **may not use, sell or give away** the membership roster for personal gain. Membership in this League is NOT transferable or assignable.*

Each member agrees, as a condition of membership, to release and waive any claim he or she has or may have against the League, its officers, committee members or agents arising out of or related to the members participation in activities of the League or arising out of any action taken by the League or its Board to discipline or expel any member or officer.

Signature _____ Date _____

Signature is required for membership

Mail completed form with check or money order to:

League of Northern Colorado Quilters (LNCQ)
 ATTN: Membership
 P. O. Box 272593
 Fort Collins, CO 80527

Revised: 2/10