



Nimble Fingers Quilters, Inc.

Membership Application

Name

Nickname / Preferred Name

Street Address

Apt. #

City

State

Zip

Home Phone

Cell Phone

Email Address

Birthday (MM/DD)

Referred by

Date Submitted

Once we receive your application and dues payment, we will send you membership and welcome materials by email. The membership year is May 1 to April 30.

Application Submission:

Send this form by email to: Kathy Torg, Membership Chair, membership@nimblefingers.org

OR print and mail to: Kathy Torg, 119 Little Quarry Road, Gaithersburg, MD 20878.

Membership Dues Please check one:

Annual Membership, \$35.00

Partial Year Membership, \$17.50 (joining after December 1, new members only)

Payment Information

I will mail my check to Kathy Torg.

I will pay by cash, check, or credit card at the next in-person meeting.

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Office Use

Date received

Amount paid

___ Cash

___ Check

___ Credit Card

Nimble Fingers Quilters, Inc. / P.O. Box 8101, Gaithersburg, MD 20898