



Waverley Patchworkers Inc.

PO Box 422, Mount Waverley VIC 3149

Membership Renewal 2018-2019

and 2019 Roster Sign-up

OFFICE USE ONLY

Date payment received

___ / ___ / ___

PLEASE PRINT CLEARLY

Name _____ Phone _____

Address _____

Postcode _____

Email _____

Are you a quilt shop owner/business? YES NO

Are you a professional quilter? YES NO

If YES, name of business _____

I am interested in joining a Friendship Group

Amount Due: Membership \$40

(a late fee of \$5 is applicable and shall be payable on renewals between 30 November 2018 and 1 March 2019)

Amount Paid: \$ _____

Post to address above. Mark envelope **Membership**.

- Method of payment:**
- Please tick one
- Electronic Transfer
 - Cheque
 - Money order
 - Cash (only if paying at meeting)

Electronic Transfer

Details you require are:

Account Name: **Waverley Patchworkers Inc.**
BSB: **013 366** Account No: **496182847**

Always put in your name and what the payment is for as a reference. **For example, JDoeMbership.**

Print a receipt and attach a copy to your Membership Renewal form.

Membership renewal will be completed upon return of this form and correct payment of the annual subscription amount.

If annual subscription is not paid by 1 January 2019 all membership privileges cease and member's name is held on records until 1 March 2019. During this two month period and on receipt of the late fee and annual subscription, membership privileges will be reinstated.

Those rejoining after 1 March 2019 will be deemed new members (with \$10 joining fee applied).

PRIVACY STATEMENT

The personal information of members collected by Waverley Patchworkers Inc. is treated as confidential, and will only be used by the Committee of Management or Sub-committees as required for the activities of Waverley Patchworkers Inc. The personal details of the members will not be shared with or sold to other organisations or businesses.

ROSTER SIGN-UP FOR 2019

Name: _____

Thank you for offering to help!

Please write **YES** in the months below that you can offer help.

Duties	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV
Welcome											
Kitchen/Catering											
Library											
Show & Tell											
Reader Hold/Fold											

Please hand in this form at the **Welcome Table** at the Monthly Meeting or post back to **PO Box 422, Mount Waverley VIC 3149**