



# NQA Chapter Membership

Renewal Chapter # \_\_\_\_\_

New Chapter

\_\_\_\_\_  
Full Name of Chapter

\_\_\_\_\_  
Address

\_\_\_\_\_  
City State Zip

This is a new mailing address. Please change our record.

\_\_\_\_\_  
Chapter Website

Please link chapter site to NQA website chapter list

\_\_\_\_\_  
Chapter NQA Contact Person

\_\_\_\_\_  
Address

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
E-mail Address\*

\_\_\_\_\_  
Telephone\*

\*For NQA office use only

NQA Chapter policy requires that five chapter members must be active NQA members and applications cannot be processed without this information. Please list below:

Name NQA ID# and Expiration Date

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

## The National Quilting Association, Inc.

P.O. Box 12190

Columbus, Ohio 43212-0190

Phone 614-488-8520

Fax 614-488-8521

nqaquilts@sbcglobal.net

www.nqaquilts.org

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Total number of members in your chapter \_\_\_\_\_

This is a state guild.  This is a local guild.

Number of NQA members in your chapter \_\_\_\_\_

City where your chapter meets \_\_\_\_\_  
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### NQA Chapter Membership Dues

Renewal: Check your Quilting Quarterly label for quarter in which membership must be renewed

Chapter Membership Two years **\$45** \$ \_\_\_\_\_

**All chapters must renew or become a new NQA chapter as a two-year membership.**

**Note:** Please enclose completed individual membership forms if you are also including payment for individual memberships.

### Voluntary Contributions

#### Patron Levels:

[All donations support NQA programs and are tax deductible.]

Platinum \$500 \$ \_\_\_\_\_

Gold \$250 \$ \_\_\_\_\_

Silver \$100 \$ \_\_\_\_\_

Copper \$ 50 \$ \_\_\_\_\_

#### Specific program support:

[Used to directly underwrite NQA Grants; tax deductible]

Grant Program \$ \_\_\_\_\_  
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#### FOR OFFICE USE ONLY

\_\_\_\_\_ Chapter Number \_\_\_\_\_ EXP.

Received \$ \_\_\_\_\_ Date \_\_\_\_\_

Cash/ M.O./Check # \_\_\_\_\_  CCard

#### Items Available from NQA

[Items are for chapter use only and may not be distributed or resold.]

Certified Judges List by state SASE \_\_\_\_\_

Certified Teachers List by state SASE \_\_\_\_\_

NQA Logo Pin \$ 5.00 \$ \_\_\_\_\_

NQA Chapter Past President Pin \$ 5.00 \$ \_\_\_\_\_

Teaching Basic Quiltmaking Book\* \$15.00\* \$ \_\_\_\_\_

Teaching Basic Quiltmaking CD\* \$15.00\* \$ \_\_\_\_\_

Guide to Judged Quilt Shows \$20 or \$15  
NQA member - \$15, non-member \$20 \$ \_\_\_\_\_

\*Ohio Residents ADD 6.75% Sales Tax \$ \_\_\_\_\_

\*Shipping & Handling for Book or CD \$ 5.00 \$ \_\_\_\_\_

Sub-total Membership(s) \$ \_\_\_\_\_

Sub-total Voluntary contribution(s) \$ \_\_\_\_\_

Total Amount Enclosed \$ \_\_\_\_\_

My check or money order is enclosed.

Charge  MasterCard  Visa  Discover

\_\_\_\_\_  
Card Number

\_\_\_\_\_  
Expiration Date

\_\_\_\_\_  
Cardholder's Name

\_\_\_\_\_  
Cardholder's Signature

## NQA CHAPTER INFORMATION

Please return with your completed membership form to: NQA, PO Box 12190, Columbus, OH 43212-0190

Chapter Name \_\_\_\_\_

The NQA office frequently receives requests from members who would like to join an NQA chapter in their area. Please complete the following information so we can help them find a chapter.

**Note:** This information will be provided only to NQA members who inquire about joining a chapter in their area.

Is your chapter open to new members?

Yes       No       Not at this time, but we will add names to a waiting list

Contact person for membership information:

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Primary focus of your chapter:     Traditional     Art Quilts     We love it all     Other \_\_\_\_\_

Location where you meet: \_\_\_\_\_

City \_\_\_\_\_

When do you meet? Date and time: \_\_\_\_\_

Briefly describe your chapter and meetings : \_\_\_\_\_

\_\_\_\_\_

### **Other information for NQA records:**

Is your chapter interested in participating in the NQA Chapter Gallery on our website?     Yes

Is your chapter willing to help promote NQA membership, programs, and our annual quilt show in your newsletter ( Yes) and/or at your meetings, quilt shows, or other activities?     Yes

We plan to start a chapter newsletter that will be sent by e-mail. If your chapter would like to be included, please provide an e-mail address if it is not the same as your chapter contact person:

Name \_\_\_\_\_ E-mail \_\_\_\_\_

If you would like chapter news also sent directly to your newsletter editor and/or president, please provide e-mail:

Newsletter editor \_\_\_\_\_ E-mail \_\_\_\_\_

President \_\_\_\_\_ E-mail \_\_\_\_\_  
(or other member)

**Thank you – YOU ARE NQA!!!**