



1491 17 Avenue, Prince George, B. C. V2L 3Z2

MEMBERSHIP YEAR September 1st, 20_____ to August 31st, 20_____

Please circle one: REGISTRATION/RENEWAL

Last name _____ First Name _____

Birth Month _____

PLEASE FILL IN ALL AREAS:

Address _____

CITY/PROVINCE _____

Postal Code _____ Email _____

Telephone (home) _____ (cell) _____ (work) _____

Membership Dues	_____ Regular	\$50.00	Administration:
	_____ Senior (60 +)	\$40.00	Payment method _____
	_____ Students (fulltime)	\$40.00	Confirmation Initials _____

You may send your payment by e-transfer to pgqgtreasurer@gmail.com

Please put MEMBERSHIP FEES in the SUBJECT LINE OR send cheque to the Guild address above.

Prince George Quilters Guild
Notification for collection of Personal Information

In accordance with the Personal Information Protection Act of British Columbia (hereafter referred to as the "Act") any personal information collected or requested on this registration form will be used by the PGQG only for the purpose of:

- a) Maintaining a list of members of the PGQG as required by the Societies Act
- b) Maintaining a mail and or email distribution list for PGQG business items
- c) Maintaining a membership list for distribution to executive/committee leads /Members

Personal information collected will not be disclosed to any PGQG member or third party without consent. Any changes, please notify Membership Chair.

By completing and signing this membership registration form, you are consenting to the collection of personal information in this form for the purposes described above.

I consent to my personal information appearing on the membership listing given to other members of the PGQG.

Signature _____ Print Name _____

I do not consent to my personal information appearing on the membership list given out to other members of PGQG.

Signature _____ Print Name _____
