

Weavers' Guild of Rochester, INC.

 $P.O.\ Box\ 616\ \cdot\ East\ Rochester,\ NY\ 14445$ Enhancing lives through study and creative expression in weaving and fiber arts

2024-2025 Membership Form

Name:(Mr)(Ms)(Mrs)Address:		□ Renewing Member □ New Member
		□ \$40 Individual
		Phone: Date:
□ \$15 Newsletter only		
Email: Name for name tag:		•
		I would like to make a tax-deductible contribution to the □ Guild General Fund □ Weaving & Fibers Arts Center □ Scholarhip Fund In the amount of \$
	Please send <i>The Yarn</i> to me	□ by Email or □ in Print
	After February 1, 2025, dues for first time n	nembers will be half the regular rate listed above.
	Me	mbership Survey
effort	Weavers' Guild of Rochester depends on the volunters of the membership. Please identify ways in which y d be willing to participate:	
Would	v	4. This year the Guild should concentrate on:
	Programs or workshop planning Fiber show and Sale Outreach and Publicity Library Membership and Hospitality Scholarship	5. I would like to see the Guild offer these programs or workshops in the future:
	Newsletter Weaving and Fiber Arts Center –WaFAC	6. The person I would most like to hear present or give a workshop at the Guild is:
2. Whi	ch skills can you offer to the Guild as a volunteer?	7. I would be willing to help with evening meetings
	Organizing Financial (spreadsheets, planning) Website management Advertising	8. I would like to see the Guild offer these programs in the evening meetings.
	Hosting guests Writing and editing Previous experience with other boards Other	9. Is there anything the Guild should do to make meetings or programs more accessible for you?

Mail this form to the above address. Include your check payable to "Weavers' Guild of Rochester, Inc."

Please note "membership" in check memo and on the outside of the envelope.

The membership year begins June 1 and runs until May 31 of the year following.