

Quilt Guild Contact Information

Please provide the following information, so I can better communicate with you for your event. Please provide at least two contacts in case of emergency.

Primary Contact

Name _____

Guild Title _____

Guild Website _____

When does your term expire? _____

Address _____

City/State/Zip _____

Home Phone _____

Cell Phone _____

E-mail _____

Guild Name _____

Guild City _____

Nearest/best airport _____

Dates of your event _____

Day of the Week (Lecture) _____

Day(s) of the Week (classes) _____
(example: first Monday of the month)

Alternate Contact

Name _____

Guild Title _____

When does your term expire? _____

Address _____

City/State/Zip _____

Home Phone _____

Cell Phone _____

E-mail _____

Other Information

Does your guild share speaker with a neighboring guild? If so, please provide the name and contact person for that guild.

Name _____

E-mail _____

Would you like your event to appear on the calendar on my webpage? _____

Advance information for guild newsletter

- 2 months in advance
- 6 months in advance
- 1 year in advance