

2011 MEMBERSHIP DUES

Please complete the portion of this invoice applicable to you as a guild. If your guild participates in the SCCQG insurance coverage, be sure to include payment for your insurance premium at the rate of \$2.75 for each paid member of your guild at the time you issue the check. Make your check payable to S.C.C.Q.G. and return with this invoice, no later than January 1st (sooner is better), to:

Jan Steffen
1323 Montecito Lane
Fallbrook, Ca 92028

If you have any questions, please call Jan at 760.731.1167 or e-mail her at janicesteffen@roadrunner.com or e-mail her at janicesteffen@roadrunner.com

Please provide the information highlighted below for guild or individual membership.

Guild Membership:

Dues are \$30.00 per guild

Guild Name:
Guild dues:
Number of Members:
Insurance premium (\$2.75 /member)
Check Number:

Contact Name and address for Guild:

Name:

Address:

City and State:

Email:

Website:

Please remember to update the website with your current officer listing. Also, please ensure that the full address is included for each officer (including city and zip code).