

## 2012 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 714.745.7221 or e-mail her at info@sccqg.org

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 per member)  
 Check Number:


<b>Contact Name and address for Guild:</b>	
Name:	
Address:	
City and State:	
Email:	
Website:	

Please remember to send updates to info@sccqg.org with your current officer listing. Also, please ensure that the full address is included for each officer (including city and zip code and email address).

President and email: \_\_\_\_\_

Program Chair and email: \_\_\_\_\_

SCCQG Rep and email: \_\_\_\_\_

Newsletter Editor and email: \_\_\_\_\_

Any additional information or concerns: