



2020-2021 MEMBERSHIP AND RENEWAL FORM

**YOUR FORM AND PAYMENT MUST MUST BE RECEIVED BY JUNE 15th FOR YOU TO BE LISTED
IN THE GUILD DIRECTORY. MEMBERSHIP YEAR IS JULY 1 TO JUNE 30.**

NAME _____

CELL PHONE _____

ADDRESS _____

HOME PHONE _____

BUSINESS PHONE _____

EMAIL _____

BIRTHDAY MO/DAY _____

I DO NOT HAVE AN EMAIL ACCOUNT _____

INDIVIDUAL MEMBERSHIP _____ \$30

FAMILY MEMBERSHIP _____ \$35 (ALL INDIVIDUALS RESIDING AT SAME ADDRESS)

SUSTAINING MEMBERSHIP _____ \$50 OR MORE

DONATIONS OVER \$30 (\$35 FOR FAMILY MEMBERSHIP) ARE TAX DEDUCTIBLE

PLEASE MAIL THIS FORM, WITH YOUR CHECK PAYABLE TO PACIFIC SCRIBES, TO:

PACIFIC SCRIBES MEMBERSHIP

ATTN: MEMBERSHIP CHAIR - 4773 ROUNDTREE DR - CAMPBELL - CA - 95008

_____ I TEACH CALLIGRAPHY (PLEASE PROVIDE DETAILS ON REVERSE)

_____ I HAVE A CALLIGRAPHY BUSINESS

BUSINESS NAME _____

BUSINESS PHONE _____

WEB ADDRESS _____

I AM INTERESTED IN ASSISTING WITH THE FOLLOWING:

_____ EXHIBITS

_____ PHOTOGRAPHY AT EVENTS

_____ OUTREACH

_____ EVENT PLANNING

_____ MAILINGS

_____ EVENT REFRESHMENTS

_____ NEWSLETTER

_____ EVENT SET UP/CLEAN UP

_____ DESIGNING FLYERS

_____ HOST A WORKSHOP INSTRUCTOR

_____ PLANNING GENERAL MEETINGS

_____ ORGANIZING WORKSHOPS

For PS use only

Received _____

Check No _____

Check Date _____

Amount _____