

## Missouri Basketweavers Guild, Inc. Membership Application (Please print information)

WEAVERS C		Membership Year(s) January 1, 20 to December 31, 20			
	Renewal	Returning Past Mer		Member	Life Member
Address					
				Zip	
1st Phone Contact				Type: 🗌 Cell	☐ Home phone
2 <sup>nd</sup> Phone Contact				Type: ☐ Cell	☐ Home phone
Email					
Facebook ID Birthdate (Month/Da					/Day)
Basket Business Na	ıme				
Basket Business W	eb Site				
Basket Business Ph	one Number:				
	Do not include	e my information in the o	nline password pr	otected memb	ership directory.
Attention	_ · _ · _ n First Tim	e Members Only:			··-· !
valid for me	embership year ll receive me	o is open to first time MBG rs 2017 and 2018. Members embership for 2017. Form	ship forms received	d January 1, 20	17 to August
members d	uring the one	membership you must not year free membership will afforded members incl isite.	receive the online	Twining Time	es newsletter
year, memb	ership can be	om January 1st through Dec continued by completing he subsequent year.			_
	•	MBG's free one membersh he box for "New Member."		rive. I have co	ompleted the
! — !		(Sign)		(Date)	!