

Gulf States Quilting Association
Shop Application Form

Shop Name: _____

Owner's Name(s) (Please print): _____

Shop's Physical Address (if applicable): _____

Shop's Mailing Address (if different): _____

Shop's Telephone Number: (_____) _____
Area Code

Shop's website: _____

E-mail address you wish to make available to GSQA members:

Please describe your shop and indicate anything you specialize in:

I have enclosed payment for the following:

Membership dues at \$20.00 per year for _____ year(s) = \$ _____ Total amount enclosed

Please make check payable to GSQA and mail to: Janet Bailey, Membership Director
7220 O'Neil Drive
Harahan, LA 70123

Send questions/problems to me at: janetb817@gmail.com

Date received: _____ Cash/M. Order/Check #: _____ Amount: \$ _____ Date of Deposit: _____
Date entered in database: _____ New Expiration Date: _____ Date Membership Card mailed: _____
GSQA Shop Member #: _____ Form Revised 3/2011