

Our Purpose

QCNYS, Inc., a non-profit organization, was formed in 1986 for the following purpose:

- 1) To foster and promote knowledge and participation in all forms and aspects of quilt making.
- 2) To act as an information network for quilt guilds with similar objectives in promoting interest in quilt making.
- 3) To readily inform quilt guilds and individual members of resources available to them.
- 4) To foster education through the cooperative sharing of speakers, teachers and programs.

A Not-for-Profit Group Member ...

... is any not-for-profit or non-profit organization created with a similar purpose.

A Not-for Profit Group Members' Obligation to QCNYS, Inc. is to

- ... Promote QCNYS, Inc. sponsored events.
- ... Consider holding an officer or chair a committee in the organization.
- ... Agree to not misuse our membership lists.
- ... If interested in advertising, provide copy ready ads for the newsletter.

QCNYS, Inc. Obligation to a Not-for-Profit Group Member is to

- ... Include the organization on the mailing list for all QCNYS publications.
- ... Invite the organization representatives to all quarterly delegate meetings of the QCNYS.
- ... Include the organization on all membership lists distributed to all members.
- ... Discounted rates will be provided for up to three participants from each Organization at Consortium sponsored events.

Quilters Consortium of New York State, Inc.

Application for Not-for-Profit Group Membership

Name of Organization : _____
Address of Organization : _____
City: _____ State: _____ Zip: _____
Telephone: _____
Organization Website: _____
Brief Description of the Purpose of the Organization: _____

Contact Person: _____
Title: _____
Home Telephone: _____
Personal Email: _____

MEMBERSHIP DUES

Annual Membership is from January to December.
Dues for an annual membership are \$50.

Check or money order must accompany this application. Make checks shall be made payable to **QCNYS, Inc.** Dues and fees are payable in advance and are not refundable.

Send application and dues to:
Linda Storrings, QCNYS Membership Chair
291 Kline Road
Pennellville, NY 13132-3181

By my signature below, I agree to the terms of membership and obligations as stated on the reverse side of this application.

Signed _____ Date _____