

For Office use only
Date _____
Check # _____
Amount Pd \$ _____

Greater San Angelo Craft Guild Membership Application

Please Type or Print

Name: _____

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Phone: _____ **Cell Phone:** _____

E-mail: _____

Please provide detailed information on your crafts:

Please Print Name:

I _____ do verify that **ALL ITEMS IN MY BOOTH AT ALL TIMES WILL BE HAND CRAFTED** by me, my created design, pattern design or significantly altering techniques to create a new and unique product from the original item by me. I also verify that I do have a current Texas Sales Tax Permit.

I also agree to attend five (5) meetings (May and September shows count as a meeting) and to do all three (3) Guild Shows for the year 1st WEEKEND IN May, 3rd WEEKEND IN SEPTEMBER, & 1st WEEKEND IN DECEMBER) per the membership requirement. I must contact a board member by Wednesday before set up on Friday with the reason for not participating in a show, if not I lose my MEMBERSHIP.

Signature: _____ **Date:** _____

Individual Dues (you only) \$14.00 per year **Dues Paid: \$** _____
Family (you and one other crafter) \$20.00 per year **Dues Paid: \$** _____

For more information, call one of the officers

Send to
 Greater San Angelo crafter
 PO Box 27
 San Angelo, TX 76902

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