



Membership Application

New Membership _____ Renewal _____ Birthday: Month _____ Day _____

Please Print Legibly:

Name _____

Address _____

Business Name _____

Address (if different) _____

Phone # Day _____ Night _____ Cell _____

Email _____ SC Retail License # _____

My Crafts: Please describe end products/materials used _____

As an active member of the Guild, describe specifically how you can assist the Guild in accomplishing its goals (and your own). Consider for what shows and committees you might participate/volunteer to help; what special interests, skills, or talents you have that might benefit the Guild and its members.

Signed _____ Date _____

Dues are \$30.00* per person, except legal partnerships. Bring the completed application and dues to the meeting or mail to:

Island Crafters Guild, P.O. Box 14247, Charleston, SC 29422

*Deadline for renewal membership: March 2017; New members are accepted throughout the year. New memberships received after July 1 will pay half of the yearly dues.