



# Arapahoe County Quilters (ACQ) New Business Membership Form

**DUES:** Dues are **\$35.00** per year, January 1 through December 31. Dues are not prorated. Make checks payable to ACQ. Mail your payment (check only please) and completed form to ACQ, PO Box 5357, Englewood, CO 80155 or bring it (cash, check, credit card) with you to the next meeting.

**BUSINESS NAME:** \_\_\_\_\_ **Today's Date** \_\_\_\_\_

Business Owner/Contact Person: \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ **Email (required)** \_\_\_\_\_

Birthday (month & day) \_\_\_\_\_ **Payment Method:**  Cash  Check  Credit Card (at meeting or online)

**Communication Vehicles Used:** Website Address \_\_\_\_\_

Facebook \_\_\_\_\_ Instagram \_\_\_\_\_ Twitter \_\_\_\_\_

Pinterest: \_\_\_\_\_ Other \_\_\_\_\_

For use in adding your business to our Products & Services Directory for ACQ Business Members, please identify those that apply to your business. Use the blank area to add a service or product you provide but is missing.

<input type="checkbox"/>	Batting, Notions, & Fabric	<input type="checkbox"/>	Binding	<input type="checkbox"/>	Braid Template
<input type="checkbox"/>	Classes	<input type="checkbox"/>	Crazy Quilt Supplies	<input type="checkbox"/>	Custom Heirloom Quilting
<input type="checkbox"/>	Custom Quilt Making	<input type="checkbox"/>	Hand Dyed Fabrics	<input type="checkbox"/>	Hand Embroidery
<input type="checkbox"/>	Lecturer	<input type="checkbox"/>	Long-Arm Dealer	<input type="checkbox"/>	Long-Arm Quilter
<input type="checkbox"/>	Machine Embroidery	<input type="checkbox"/>	Memory Quilts	<input type="checkbox"/>	Online Shop
<input type="checkbox"/>	Pattern Designer	<input type="checkbox"/>	Quilt Repair	<input type="checkbox"/>	Quilt Shop
<input type="checkbox"/>	Sewing Machine Dealer	<input type="checkbox"/>	Sewing Machine Repair	<input type="checkbox"/>	Threads/Embellishments
<input type="checkbox"/>	Website Design/Consulting	<input type="checkbox"/>	Yarn	<input type="checkbox"/>	Other: _____

Provide a brief description of your business (optional). 100 characters maximum): \_\_\_\_\_

I authorize ACQ to utilize photos of me or my fabric creations on the website, in social media, and within the ACQ newsletter. Please indicate by signing here: \_\_\_\_\_

I give my permission for ACQ to send the newsletter and other communications by email.  Yes  No

Do you want to be listed as an individual in the password-protected, online Roster as well as having your business listed as a business member on the ACQ website?  Yes  No

If yes, please identify which address you want to be in the Individual Member Roster.

Use Business Address **Or**

Use the following alternate

**CONTINUED ON THE BACK**

Address: \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone \_\_\_\_\_ Email \_\_\_\_\_

I am interested in learning about Business Spot Light opportunity at an ACQ meeting. \_\_\_YES \_\_\_NO

I am interested in learning about donating one or more meeting door prizes. \_\_\_YES \_\_\_NO

**MEMBER SURVEY**

**THE FOLLOWING QUESTIONS WILL HELP THE ACQ BOARD BETTER UNDERSTAND AND SERVE THE ACQ COMMUNITY**

How did you learn about ACQ? Place a check to the left of your answer.

<input type="checkbox"/>	ACQ Member	<input type="checkbox"/>	Facebook	<input type="checkbox"/>	ACQ Web site	<input type="checkbox"/>	Purchasing Raffle ticket	<input type="checkbox"/>	Quilt Store	<input type="checkbox"/>	Quilting Class
Other: _____											

Identify your Quilting Style by checking to the left of those that apply.

<input type="checkbox"/>	Traditional	<input type="checkbox"/>	Modern	<input type="checkbox"/>	Art	<input type="checkbox"/>	Memory Quilts	<input type="checkbox"/>	Miniature	<input type="checkbox"/>	Other: _____
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Identify your interest in the following **Quilting Techniques** by writing in the number 1-4 next to each entry in the table below. Refer to the definitions below.

**1 Regularly do                      2 Occasionally Do                      3 Want to learn                      4 No Interest**

<input type="text"/>	Piecing	<input type="text"/>	Applique by hand	<input type="text"/>	Applique by machine	<input type="text"/>	Foundation/paper piecing
<input type="text"/>	English paper piecing	<input type="text"/>	Quilting by hand	<input type="text"/>	Quilting by home machine	<input type="text"/>	Quilting by longarm
<input type="text"/>	Machine embroidery	<input type="text"/>	Improvisation	<input type="text"/>	Embellishment	<input type="text"/>	Other: _____

**Participation in an ACQ Quilting Bee?**

Are you currently a participant in an **ACQ Quilting Bee**? \_ Yes \_ No

If **yes**, name of quilting bee \_\_\_\_\_

If **no**, are you interested in: \_ Joining a bee? \_ Starting a bee? \_ Neither at this time

**WHAT DO YOU WANT ACQ TO DO FOR YOU?**

Please rate the activities below based on their importance to you, where:

**1 Very Important –                      2 Somewhat Important                      3 Not Important**

<input type="text"/>	Monthly presentations by quilting professionals	<input type="text"/>	Exhibit opportunities
<input type="text"/>	Professional critiques- to improve my work	<input type="text"/>	Opportunity to advertise my business
<input type="text"/>	Quilting in small groups	<input type="text"/>	Participate in Retreats held in Colorado
<input type="text"/>	Opportunities to socialize with other quilters	<input type="text"/>	Travel opportunities for workshops
<input type="text"/>	To learn new quilting skills via local workshops	<input type="text"/>	Participate in making quilts for charitable causes
<input type="text"/>	To make some new quilting friends	<input type="text"/>	Value having a library of Quilting Books to borrow from

**ACQ is a VOLUNTEER ORGANIZATION. HOW CAN YOU HELP MAINTAIN AND/OR GROW ACQ?**

**ACQ needs you!** For 30+ years, quilters have given generously of their time to build ACQ and support its members' interests. Every member benefit from their contributions. We ask all members to help the leadership of ACQ maintain services to our members and community.

Please identify how you can contribute to ACQ by writing in the number 1-4 next to each entry in the table below. Refer to the following definitions.

1 Can Regularly      2 One-time task      3 Need Information      4 Cannot assist

Charitable Quilts: complete kits, attend sew day, quilt (home machine), bind	CPNLS (Fetal Loss): complete kits	Quilt Show Committee
Library: check in / check out books, help with book sale	Membership Support: distribute membership cards during peak months	Program Support Team: help with speaker- transport, dinner, help setup & take down
Raffle Quilt Support: Sell tickets at events	Accounting or treasurer experience	Designing Quilts, Blocks
Excel	Food Preparation for Quilt Show	Fund Raising
Graphic Design	Newsletter	Photography
Project Management	Teaching / Demonstrating Quilting technique(s)	Use of computer applications (i.e. SignUp.com, Jot forms)
Social Media Support	Web Site Updates	Writing & editing

**ACQ LEADERSHIP**

I am interested in learning more about serving as an officer. \_\_\_\_YES \_\_\_\_NO

I am interested in learning more about becoming a committee chairperson. \_\_\_\_YES \_\_\_\_NO

**PROGRAM SPEAKER AND WORKSHOP TOPIC SUGGESTIONS**

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