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| Macintosh HD:Users:depasqua:Desktop:Misc:Projects:Consulting:SJBS:SJBSLogoFull.jpg | PO Box 1242  Bellmawr, NJ  08099-5242  www.southjerseybeadsociety.org |

**Application for Membership**

Please complete this form and return it with your payment

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| Membership Dues – September 1 through August 31 | Date: |
| $30.00 $20.00 for seniors (65 and older) | New Member: Renewal: |

**Please print clearly**

|  |  |
| --- | --- |
| Name: | Telephone (H): |
| Address: | Telephone (C): |
| City – State – Zip: | Email: |

Do you wish to be included in a members list available at SJBS meetings? The list includes your name, hometown, state, and email address. YES NO

**Please share your interests and talents with us**

1. Do you have any experience with beadwork? If so, how long have you been beading?
2. What kinds of beads do you work with the most? (i.e.: seed beads, lampwork, etc.)
3. What kinds of workshops would you like to see presented by the SJBS?
4. Would you attend weekend workshops? YES NO
5. Do you have any interest or experience in marketing your work? YES NO
6. Do you own a bead-related business? YES NO  
   (If yes, please provide name and address)
7. Which of the following topics are you interested in pursuing? Please check all that apply.

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| --- | --- | --- |
| Beadwork Embellishments | Bead Stringing | Wire work |
| Beaded Cabochons | Bead Weaving\* | Elements of Design and Color |
| Glass Bead Making | History and Culture | Metalworking |
| Polymer Clay work | Stone Identification |  |

\* Peyote Stitch – Brick Stitch – Square Stitch – Herringbone – Loom Work – etc.

1. Are there any areas in which you can share your talents to assist the South Jersey Bead Society?

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| --- | --- | --- |
| Administration | Membership Development | Educational Programs |
| Semi-annual Events | Newsletter Contributions | Finance and Fundraising |
| Library | Other: | |

We welcome any comments that you may have.

Your signature:

**For membership chairperson use only**

Paid: Cash / MO / Check #:\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of check: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Membership card: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Membership listing: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_