## Stan Hywet Needlework Guild Membership Application – 2024

NAME			
STREET ADDRESS			
CITY HOME PHONE	STATE		ZIP
EMAIL ADDRESS			
Emergency Contact: (Name, re	lationship, phone (	(indicate H home, '	W work, or C cell))
Check here if you were a me	mber before and are	e rejoining.	
Please check as applicable:			
A. Permission to publi			k
B. DO NOT PUBLISH e		-	
C. Please send the Gui		-	
D. If you have email, but			
here and include a			
E. If you have no email	, you will automati	cally receive the n	ewsletter by USPS
BIRTH MONTH/DAY			
Stan Hywet Hall & Gardens (SH			
Membership Number			
Check here if obta	• ·		ogress equired if 80 years or older)
	0		, ,
ENCLOSE A CHECK FOR DUES N	ADE PAYABLE TO	SHHG, INC (Stan F	lywet Hall & Gardens, Inc.)
A. Active member - \$15	500		
·		ur membership ex	tends through the next year.)
B. Printed newsletter fe			
C. Optional: donation to	•		
I			
Send this form with your check	to		
Stan Hywet Hall & Garc			
ATTN: Needlework Guil		air	
714 North Portage Path	•		
Akron, OH 44303			