



**2025 MEMBERSHIP APPLICATION**

**Please complete the information below and return with your check for \$25.00**

*Make check payable to SCLH Needle Arts*

*Please do NOT send cash*

*Send your application and check to the Membership Chair:*

Debby Bainbridge  
985 Yosemite Lane  
Lincoln, CA 95648  
(916) 409-5552; (707) 322-1204  
debeke26@gmail.com

**PLEASE PRINT**

Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_

*An email is required if you want to receive the monthly Needle Arts Newsletter*

***I DO NOT want my information included in the member roster:*** \_\_\_\_\_

\_\_\_\_\_ I am a returning member

\_\_\_\_\_ I am a new member

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 Would you consider serving on a committee or as an officer?      YES      MAYBE

Would you consider being a back up to a committee chair?      YES      MAYBE

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*The SCLH Needle Arts Club follows all current CDC guidelines*