



# Workshop Application Form

- This form must be completed in order to attend a Guild Workshop.
- Save the form in your name and complete on your computer (tab between the fields).
- Email the completed form to the Workshop Convenor.

Workshop Name:

Code:

Date:

Your Name:

Address:

Contact Phone Number:

Email:

Workshop Fee:

Amount Paid:

Balance Owing:

Receipt Number:

(either QGSA or Bank)

Quilters' Guild of SA Member:

Yes: ☐ No: ☐

Member Number:

Please email my requirements list:

Yes: ☐ No: ☐

\*\*\* Please note: Non-Guild members are not covered by the Guild Insurance policy when attending a workshop.

## WORKSHOP POLICY STATEMENT

1. Numbers in workshops are limited so book early to ensure a place.
2. Contact Workshops Convenor, Heather Ford by email [workshops.saquilters@gmail.com](mailto:workshops.saquilters@gmail.com) to confirm vacancies before paying online. There may be a waiting list.
3. The workshop cost advertised is applicable to financial Guild members. An additional \$10 fee applies to each Guild Affiliate Group member and non-Guild member participating in workshops.
4. **PAYMENTS – Workshop fee to be paid in full 3 weeks prior to the date of the workshop.**
  - BY CASH/CHEQUE/CREDIT CARD – IN PERSON ONLY AT GUILD MEETINGS
  - BY DIRECT DEPOSIT: Bank: BSB 105-051 Account Number: 207 144 540
  - Account Name: Quilters' Guild of SA Inc.
  - Reference: Member number + Workshop code
5. Your place in the workshop will be confirmed once full payment has been made and an Application Form and receipt number has been received by the Workshops Committee. These can be emailed to [workshops.saquilters@gmail.com](mailto:workshops.saquilters@gmail.com). A confirmation email will be sent to you.
6. A Workshop Requirements list will be forwarded once a completed workshop application form and full payment for the workshop is received.
7. **CANCELLATIONS:** Can't come to the workshop? Let us know as soon as possible as we may have a waiting list. If someone takes your place, you will be sent a refund.
8. **I have read and understand the above workshop policy statement.**

Signed (Print Name):

Date:

For office use only: Application received..... Payment received..... Requirements list sent.....