



California Association of Machine Embroidery

C.A.M.E.
Membership Form



CURRENT MEMBERS BE SURE TO RENEW YOUR MEMBERSHIP BEFORE
JANUARY 1

Make Checks Payable to C.A.M.E. and mail to:

C.A.M.E. (California Association of Machine Embroidery)
P. O. Box 6474
Napa, CA 94581

Dues: *\$35.00 (January 1, to December 31)
(\$40.00 if paid after December 31, for renewing members only.)
*Membership Fee for NEW members prorated on a quarterly basis.

Method of Payment:

CASH _____

CHECK (# _____)



Name: _____ New Member: _____

(Please Print Clearly)

To insure accuracy for our Roster renewing and new members please complete the following:

Address:

City: _____ State: _____

Zip Code + 4 Digit: _____ - _____ Home Phone: (____) _____

FAX #: (____) _____

E-Mail Address: _____

Business Name: _____

Business Phone: (____) _____ Business FAX: (____) _____

Date Paid: _____

Machine Embroidery/Sewing Interests: _____

Group/s to which you belong: _____

How did you learn of C.A.M.E.?/Was there a referer? _____