

CENTRAL INDIANA LEATHER GUILD

Membership Application

Date _____

Please Print

Name _____

Address _____

City _____ State _____ Zip _____

Phone# _____ Email _____

Are you a member of another IFOLG guild _____ If so, which guild _____

What guild will you be representing at IFOLG convention for competition _____

(IFOLG members in good standing that do not represent CIL do not pay additional IFOLG dues)

Membership Dues - Jan 1 thru Dec 31

Single Person - \$25

Family includes spouse and children - \$40

Sponsored Member - \$15

Donation Membership for 18 and under - \$15

Additional International Federation Dues per person \$5

Mailed Quarterly Newsletter \$14

Additional Donation _____

Total _____

Make Checks Payable to - Central Indiana Leather Guild

Mail payment and include this form to - 8178 Colt Dr. Plainfield IN. 46168

Family Membership

Spouse _____

Child 1 _____

Child 2 _____

Child 3 _____

<https://centralindianaleathercrafters.org>

