

HHCC 2012 Membership Form

NAME:		
ADDRESS:		
CITY:	STATE:	ZIP:
PHONE DAY: ()	PHONE EVE: ()
E-MAIL:		
The above information is use	d only by the HHCC Officers for offi	icial HHCC business needs.
I am a new member	r.	
I am renewing my	membership. My HHCC Membershi	ip number is:
CGOA Membershi	p my number is: and is curre	ent through/
 Enclosed is my M 	Membership Fee for \$18.00 U.S. (non	a-CGOA members)
orCGOA members	Membership Fee \$9.00 U.S.	
I have enclosed a check or m	oney order (U.S. funds only) payable	to "The HHCC".
❖ I will process m CrochetClubinCT@hotmail.c		yPal.com. My payment will be made to
I am a(list your level: beginner, interm	crocheter and am interested i ediate, advanced, professional)	in learning more about
(list the things you'd like to lear	n about crochet)	
I am good attechnique/method.	in crochet and wou	ald like to volunteer to help teach our members thi
How did you first learn of Th	ne HHCC:	
		aching? Webpage building? Fund Raising? ke this organization run smoothly! What would