



Calligraphers' Guild of Manitoba

Membership form, 2018–19

Thank you for your interest in the CGM.
Please print, fill out, and return this form to
join or renew your membership with the guild.

Name: _____

Email: _____

Telephone: _____

Mailing address: _____

I give permission for my contact information to be
published in the CGM directory.

I give permission for photographs of myself or my
work to appear on the CGM web site.

Signature: _____

Date: _____

renew, \$30 enroll, \$40

Membership fees are due annually in September.

Cheques payable to:

Calligraphers' Guild of Manitoba

Mail to: PO Box 23094 RPO McGillvray
Winnipeg MB R3T 5S3