

**2024**  
**CBQ Membership Renewal Form**

Name: \_\_\_\_\_

Any Changes to Your Information? (Please Circle)    Yes    No

Membership Category:

( ) Regular        \$35.00

**If you answered “No” above – Stop Here**

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-Mail \_\_\_\_\_ Birthday: Month/Day \_\_\_\_\_

**Membership by Mail:**

**Send this renewal form and a check made out to CBQ to:**

**Terri Klancer, 12930 Sleepy Creek Way, Apt 102, Woodbridge, VA 22192  
(703-232-0186)**

If you would like to have your membership card mailed to you, please enclose a stamped self-addressed envelope with your renewal form and check.

