

**The Embroiderers' Guild of America, Inc.
South Central Region
Longevity Pin Order Form**

Date: _____

Requested by: _____

Chapter: _____

Ship to: _____
(Name)

(Address)

(City/State/Zip)

(Telephone/E-mail)

Year	# Ordered	Cost Each	Total Cost
5-year	_____	\$1.35	_____
10-year	_____	\$1.35	_____
15-year	_____	\$1.35	_____
20-year	_____	\$1.35	_____
25-year	_____	\$1.35	_____
30-year	_____	\$1.35	_____
35-year	_____	\$1.35	_____
40-year	_____	\$1.35	_____
TOTAL	_____		\$ _____

Enclose Chapter check for total payment and mail to:

**Michelle Kocurek,
SCR Treasurer
5828 Greenwyck Drive
Plano, TX 75093**