

Northwest Washington Woodturners

Membership Application



CONTACT INFORMATION

Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

It is our policy to distribute the roster to club members to be used for club business and activities. May we share your contact information in this way? Yes No

WOODTURNING EXPERIENCE

Are you a member of the American Association of Woodturners (AAW)? Yes No

Level of woodturning experience: Beginner Intermediate Advanced

Area(s) of interest in woodturning:

PERSONAL INFORMATION (Optional)

Occupation (present or past): _____

Our club depends on the volunteer efforts of our members. In which of the following ways would you like to be involved (check at least one)?

- Helping at meetings
- Serving on a club committee
- Helping at public events
- Acting as a mentor for beginners
- Making a presentation

Other hobbies and interests: _____

Annual dues are \$35. Make checks payable to NWW.

Mail to:

Northwest Washington Woodturners
P.O. Box 31
Mount Vernon, WA 98373

Direct any questions to: Membership@nwwwt.org