

DATE _____



REGISTRATION FORM FOR MAINE WOODTURNERS

(Please Print All Information)

NEW MEMBER? _____ REREGISTRATION? _____ GUEST? _____ STUDENT? _____

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE _____ EMAIL ADDRESS _____

CELL PHONE _____ WEB SITE _____

(IF STUDENT) DATE OF BIRTH _____ NAME OF SCHOOL _____
MONTH / DAY / YEAR
SCHOOL ADDRESS _____

DUES \$30.00 PER YEAR, (FAMILY MEMBERSHIP, 2 PEOPLE, \$40.00), STUDENTS, NO CHARGE
MEMBERSHIP RUNS FROM NOVEMBER 1ST TO OCTOBER 31ST.

MAIL TO TREASURER: BURT TRUMAN
85 SECOND STREET
HALLOWELL, ME 04347

