WILLAMETTE VALLEY WOODTURNERS 2014 MEMBERSHIP APPLICATION

*Please complete ALL of the requested information. Thank you.

Name	Spouse's Name:	
Mailing Address	_	
City		Zip
	Alt.(cell)Phone	
E-mail address		
Year of Birth		
Are you a member of the AAW - Ame	rican Association of Woodturn	ers (Y / N)?
How long have you been woodturning	?Year(s) How often d	lo you turn?
What kinds of projects have you turned	I most often in the past year?	
Please list any topics of special interest coming year(s). Include any presenters his form if necessary.)		
Let us know if you are willing to be a r	mentor and in what areas you f	eel most qualified to assist others.
I would like to arrange to have a	a mentor work with me on (be	specific)
FThe information you provide on this application sending out the monthly newsletter, and notifying other organization without your prior express equipment and supply stores.	g you of meetings and other planned e	events. The information will not be furnished to
] Check this box IF YOU DO NOT WA ll retailers in order to be eligible for special d		
Ell 330 Sal	leted form along with your and ing Hoem, WVW Treasurer, 08 Hidden Valley Dr. NW lem, OR 97304-2323. Anyable to "Willamette Valle"	
For treasurer's use only: Date received:(da Amount Received: \$ Che New member added to roster Program / mentor info forwarded: □	Renewal member: No Chan	ges Info updated: updated 9/13/2013