

# Alabama Woodturners Association Membership Application



Date \_\_\_\_\_

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

If a Family membership, name of additional family member \_\_\_\_\_

Birthdate(s) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

Emergency contact \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Turning Experience-  
No prior experience \_\_\_\_ Beginner \_\_\_\_ Intermediate \_\_\_\_ Advanced \_\_\_\_

How many years of woodturning experience do you have? \_\_\_\_\_

Are you a current member of the American Association of Woodturners? Yes \_\_\_ No \_\_\_

Do you have a specialty that you would like to share with the membership of our club  
\_\_\_\_\_

Please describe your turning interests \_\_\_\_\_

Do you have an interest in participating in training classes offered by the Alabama Woodturners either as a student or teacher? Yes \_\_\_\_ No \_\_\_\_

Membership Type: Individual \$40 \_\_\_\_ Family \$45 \_\_\_\_ Checks should be made payable to: Alabama Woodturners Association.