MEMBERSHIP APPLICATION

NAME (REQUIRED)		
STREET ADDRESS		
CITY		
<u>STATE</u>		
PHONE OR CELL #		
<u>EMAIL</u>		
COMPANY NAME		
(IF APPLICABLE)		
PLEASE DESCRIBE YOUR WOODWORKING INTERESTS OR IN		
WHAT WOULD YOU LIKE TO	O GET OUT OF JOINING THE GUILD (OF MAINE
WOODWORKERS		

MEMBER - \$30/YEAR DUES. RECEIVE ALL DISTRIBUTED MATERIALS AND REFERRAL SERVICES. A MEMBER MAY HOLD OFFICE. QUARTERLY NEWSLETTER IS ALSO INCLUDED BY EMAIL.

CHECKS MADE OUT TO GUILD OF MAINE WOODWORKERS, INC. AND MAILED TO

PATRICIA SUNDERLAND C/O GUILD OF MAINE WOODWORKERS INC. 92 DEPOT RD. WEST BALDWIN, ME 04091