MEMBERSHIP APPLICATION & RENEWAL CHANGES
FOR 20 – 20 YEAR

New Members – Provide **ALL** information below and return with your payment.

Renewing – Name & Changes from last year **ONLY** when you make your payment.

ALL – If Receipt Required fill out bottom section.

Name …….....……AAW Member? Yes. ..... No. .....
First Last
Address: …….....…….
…….....
Postal Code:…..…….
Telephone: (……) ……-……

E – Mail:..……...@….....……...……. Willing to share E-mail address with:

Other members? Yes..... No..... Guild recognized Woodturning enterprises? Yes..... No.....

Volunteer/Interest Area:….....

ANNUAL DUES PAYMENT SCHEDULE: (Circle Appropriate Month & $ Amount)

	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
Renewal:	$45	$50	$50	(---- New Member Rate Below ----						
New:	$55	$55	$55	$50	$45	$40	$35	$30	$25	$20

Cash or Cheque (Circle Appropriate)

Received By …….

Mail to: WGO
51 Sir Constantine Dr.
Markham, ON
L3P 2X4

(Fill out and tear off the receipt below if you wish to have one)

RECEIVED FROM:

Name …….
Member/Applicant

WGO DUES PAYMENT FOR 20___– 20___

Circle Appropriate Month & $ Amount: Payment. Made By: (Cash) (Cheque)

Payment. Made in:		Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
Amount:	Renewal:	$45	$50	$50	(---- New Member Rate Below ----						
	New:	$55	$55	$55	$50	$45	$40	$35	$30	$25	$20

Received By …….