

Detroit Area Woodturners Membership Application

Name _____

Business Name _____

Address _____

City _____ State _____ Zip _____

Telephone _____

Email

Address _____

Are you a member of the American Association of Woodturners
(AAW): Yes _____ No _____

Are you a new member to our club (DAW) Yes _____ No _____

Payment Method: Check ___ Cash (do not mail cash) ___ PayPal ___

Type of Membership _____

\$40 Individual, \$50 Family

Make Check Payable to: Detroit Area Woodturners

Bring to a meeting or mail to: Detroit Area Woodturners
c/o Mark Wallace
9051 Virginia St
Livonia, MI 48150-3669