

Woodworkers of Central New York, Inc.

Membership Application Form — Jan 1, 2023 to Dec 31, 2023

Memberships
After Oct 1st
Include 2024
Membership



Complete form (*printing clearly*) and either bring to a meeting or mail to:

Woodworkers of Central New York
3405 Patchett Rd
Baldwinsville, NY 13027

_____ Date of Application

Make checks payable to **Woodworkers of CNY**

- New Member
 Renewal
 Change of Address, etc.
 Badge Request
 Other

Membership Types & Dues	<input type="checkbox"/>	Individual Membership—\$25
	<input type="checkbox"/>	Family Membership—\$35 (Adults 18 & older in an immediate family, living at the same address. Can include children who wish to become junior members) <i>[Provide names & contact information for each family member below and on reverse as needed]</i>
	<input type="checkbox"/>	Junior Members—Free (Ages 8 thru 17) <i>Must be accompanied by an adult/guardian who is a member to all meetings and events.</i>
	<input type="checkbox"/>	One Day Membership—\$5 Date: _____ <i>Used to attend a club workshop or other Board approved educational event—applied to individual membership if joins by the end of the next scheduled meeting of the same group.</i>
Badge(s)	<input type="checkbox"/>	Badge—\$9 Each [Total # ____ x \$9 = _____] Names:

General information

The Woodworkers of Central New York is a 501(c)(3) Not-for-Profit corporation registered in New York State. For programming purposed, we have four Special Interest Groups (SIGs). Sometimes programs are specifically targeted at a specific SIG group. **We ask that you mark those SIGs in which you are interested.** The newsletter is sent to all members and all members may attend any or all of the meetings, demonstrations, and other events sponsored by individual SIGs.

Information Allowed on Member List in *Member-Only* Section of Website: Name Email Address Phone Number **[Check ALL Allowed]**

Primary Member (*esp. if Family Membership*)

Name: _____
Last
First

Address: _____

City: _____ State: _____ Zip: _____

Primary Phone: _____ Home/Cell Phone: _____ Home/Cell

Email: _____

All newsletters are sent via email. If you do not have an email, please indicate here

See Information Above

<input type="checkbox"/> Carvers	<input type="checkbox"/> Scrollers
<input type="checkbox"/> Turners	<input type="checkbox"/> Woodworkers

Additional Members

[For Family & Junior Memberships—add more names, emails & SIG choices on reverse as needed]

Name: _____ <i>Last</i> <i>First</i>	<input type="checkbox"/> Carvers <input type="checkbox"/> Scrollers <input type="checkbox"/> Turners <input type="checkbox"/> Woodworkers
Email: _____	

Name: _____ <i>Last</i> <i>First</i>	<input type="checkbox"/> Carvers <input type="checkbox"/> Scrollers <input type="checkbox"/> Turners <input type="checkbox"/> Woodworkers
Email: _____	

Are you a member of the American Association of Woodturners (AAW)? No Yes Member #? _____
 [Encouraged for members of the Turning SIG, required for officers and the Turning SIG Chair]

Date Paid _____ Cash _____ Check # _____ Paypal _____ Officer _____