**MEMBERSHIP APPLICATION**

**NAME (REQUIRED) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**STREET ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CITY \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**STATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PHONE OR CELL # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**EMAIL \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**COMPANY NAME**

**(IF APPLICABLE) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PLEASE DESCRIBE YOUR WOODWORKING INTERESTS OR IN**

**WHAT WOULD YOU LIKE TO 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**

 **92 Depot Rd**

 **West Baldwin, ME 04091**