

# SEQUOIA WOODTURNERS

A local chapter of the American Association of Woodturners

## MEMBERSHIP APPLICATION & RENEWAL FORM

I HEREBY APPLY FOR MEMBERSHIP OR RENEWAL OF MEMBERSHIP IN THE SEQUOIA WOODTURNERS. I UNDERSTAND THAT THE \$40.00 ANNUAL MEMBERSHIP FEE WILL BE USED TO SUPPORT THE COSTS OF CLUB MEETINGS, CLUB SPONSORED ACTIVITIES, AND COMMUNICATIONS (WEBSITE, ETC.).

### **PLEASE PRINT CLEARLY**

NAME: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Phone # \_\_\_\_\_ E-mail Address: \_\_\_\_\_

(All correspondences will be sent to this email address)

I am a member of the American Association of Woodturners YES \_\_\_ NO \_\_\_

I would be willing to become involved with the club operations YES \_\_\_ NO \_\_\_

I would be willing to conduct a demonstration at a club meeting YES \_\_\_ NO \_\_\_

Please list any interesting hobbies or skills you may have: \_\_\_\_\_

### **Photo/Video Release**

I agree and grant the Sequoia WoodTurners Club and its authorized representatives' permission to record digital images and/or videos of my participation, works and projects. I further agree that any or all the material may be used, in any form, as part of any future publications, other printed materials or website used for education and promotion of the Sequoia WoodTurners Club, and further that such use shall be without payment of fees, royalties, special credit or other compensation.

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

All club memberships require board approval. All memberships are for the calendar year and renewable on January 1<sup>st</sup> each year. Please make checks payable to: "SEQUOIA WOODTURNERS" and return with this form to the membership coordinator at a meeting or mail to:

Sequoia WoodTurners  
P.O. Box 3952  
Clovis, Ca. 93613