



*THE EMERALD WOODWORKERS
GROUP INC.*

MEMBERSHIP APPLICATION

Please Print all answers!

First Name: _____ Surname: _____
Spouse: _____
Contact details: _____
Phone. Home: _____ Work: _____ Mobile: _____
Email: _____
Residential address: _____

Postal Address: _____

In what form of woodwork are you interested? (*i.e. turning, cabinetry, restoration, etc*)

How would you like to receive correspondence (*meeting minutes*)

(*Please circle*) Post email not at all

Preferred day and time for project days? (*i.e. Saturday mornings, Sunday afternoons*)

Introducing member: _____ *Please Sign* Proposed Member: _____ *Please Sign*
Date: _____

Fees

Membership is for 12 months January –December or part thereof.

Single \$50 Couple \$75 Student (over 13) \$0 Day member \$5

Membership is due and payable at time of application.

Membership: Approved/ Rejected

Date: _____

Signed: _____
Committee member

*President: Troy Palmer
Secretary: Vern Bunn
Email: admin@ewginc.au
P.O. Box 505
Emerald Qld 4720*