

New England Woodcarvers, Inc.

MEMBERSHIP APPLICATION

(Please Print Clearly)

Membership Status: [] New Member []Renewal		
First Name	Last Name_		
Address (Street)			
City	State/Prov	ZIP	
Email address			
Phone: (Cell)	(Hoi	(Home)	
Wood Carving Experier	nce:[] Novice[] Intermediate[] Master Carver	
Are you part of a local	carving club: [] Yes [] No		
f yes, name of club Location			
Any particular carving s	tyle you are interested in:		
•	es are \$35 per year. Renewal is o re a NEWC email newsletter.	due July 1st e ach year.	
\$ Dues \$35	x years		
\$ NEWC D	onation (Tax Deductible)		
\$ Total Enc	losed		
Make check payable to	 New England Woodcarver Attn: Ed Brackett 4 Chamberlin Dr. Litchfield, NH 03052 	s, Inc.	

Your Membership Card **will be emailed to you** as a PDF to the email address listed above.

We appreciate your continued participation and support of the New England Woodcarvers, Inc.