

**Detroit Area Woodturners**  
**2021 Membership Application**

Name \_\_\_\_\_

Business Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_

Email Address \_\_\_\_\_

Are you a member of the American Association of Woodturners (AAW) Yes \_\_\_\_\_ No \_\_\_\_\_

Are you a new member to are club (DAW) Yes \_\_\_\_\_ No \_\_\_\_\_

Type of Membership \_\_\_\_\_ \$40 Individual \_\_\_\_\_ \$50 Family \_\_\_\_\_ \$30 Friend of DAW

Make Checks Payable To: Detroit Area Woodturners (DAW)

Bring to a meeting or mail to: Detroit Area Woodturners

C/O Mark Wallace  
9051 Virginia St.  
Livonia, MI 48150