



MAINE VETERAN WOODTURNERS  
APPLICATION FOR MEMBERSHIP

Date: \_\_\_\_\_

Name: \_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

E-Mail: \_\_\_\_\_

Phone number: \_\_\_\_\_

Past or present military affiliation: \_\_\_\_\_

Years in military: \_\_\_\_\_

I am applying for membership as one or both of the following:

\_\_\_\_\_ Woodturner membership (must be a veteran)

\_\_\_\_\_ Supporter membership (need not be a veteran)

Signature of applicant: \_\_\_\_\_

Submit completed form by email or snail mail to:

MaineVeteranWoodturners@Gmail.com

Gene Kelso

PO Box 344

Eddington, ME. 04428