



ACTIVE MILITARY  
PERSONNEL \_\_\_\_\_

## 2018 MEMBERSHIP APPLICATION

Complete this application by **clearly** printing the information requested in the spaces below, and returning this form, along with your check in the amount of **\$60.00** to:

**Joe Bottigliere**  
1238 Church Street  
Bohemia, NY 11716

Checks should be made out to the Long Island Woodworkers

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

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

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_

**E Mail Address:** \_\_\_\_\_

**EMERGENCY Contact and Telephone#:** \_\_\_\_\_

*Primary woodworking interest:* \_\_\_\_\_

*Other woodworking related interests:* \_\_\_\_\_

*How would you rate your skill level:* \_\_\_\_\_

*What would you hope to gain from the club:* \_\_\_\_\_

**OTHER COMMENTS, SUGESTIONS, EXPECTATIONS:**

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**Your Membership Dues includes full access to all official SIGS!  
CABINETMAKERS; CARVERS; SCROLLERS; TURNERS**