

Entered: _____

Badge: _____

K-W WCC MEMBERSHIP FORM

Please circle your preference – Mr., Mrs., Ms., Miss.

Last Name

Initial

First Name

Address _____

Apartment/ Unit # _____

City _____

Postal Code _____

Home Phone _____

Mobile Phone _____

E-mail address _____

EMERGENCY INFORMATION

Emergency contact person _____

Relation to contact person _____

Emergency Phone (519) _____ Mobile _____

Doctor's Name _____

Doctor's Address _____ Phone _____

Important medical information _____

Machine Skills

Machine	A lot	Some	Need help
Bandsaw			
Scroll Saw			
Router			
Jointer			
Planer			
Lathe			
Drill Press			
Sewing Machine			

ADDITIONAL MEMBER INFORMATION**Craft or Project Interest**

First interest _____

Second interest _____

Other interests _____

How did you hear about us? Word of Mouth _____ Web site _____

Ad in Leisure _____ Magazine ad _____ Other _____

Member _____ Members Name (Optional) _____

CLUB INVOLVEMENT

Since this is a club run by the members for the members, it is important that members volunteer for some duties based on their skill or interest.

How would you like to contribute? _____

I have reviewed the club rules and agree to follow them.

Signed _____ Date _____

Fee Paid: _____ Date _____
(\$110.00 annual fee for 2011)

Volunteer's Signature _____