

St Louis Woodworkers Guild TODAY'S DATE _____

LAST NAME _____

FIRST NAME _____ PREFERRED NICKNAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PREFERRED PHONE NUMBER _____

E-MAIL _____

OCCUPATION/PROFESSION _____

PROGRAMS/CLASSES/TOPICS OF INTEREST _____

CHECK YOUR SKILL LEVEL: ____ Just Starting ____ Some Experience

____ Intermediate ____ Advanced

Do you have an Interest in our Mentoring Program? ____ Yes

ANYTHING ELSE YOU WOULD LIKE US TO KNOW _____

How did you hear about SLWG? _____

2018 Dues: \$40 for Basic Membership or
\$75 for Shop Membership (includes unlimited use of Guild Shop)

Please check membership level ____ Basic or ____ Shop

May be submitted at a regular Guild meeting or mailed to:

St. Louis Woodworkers Guild
PO Box 411766
St. Louis, MO 63141-9998