

**MEMBERSHIP APPLICATION / RENEWAL 2022**

**Membership No:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(to be completed by M’Ship/Treasurer)*

**Applicant’s Details** *(if joint add both names)*

|  |  |
| --- | --- |
| Name/s: | Click or tap here to enter text. |
| Address: | Click or tap here to enter text. |
| Post Code: | Click or tap here to enter text. |

|  |  |
| --- | --- |
| **Phone** |  |
| **Home:** | Click or tap here to enter text. |
| **Mobile:** | Click or tap here to enter text. |
| **Email:** | Click or tap here to enter text. |

[ ]  **Individual Membership1 (£36)** [ ]  **Joint Membership2 (£45)**

I/We (*only one signature is required*) confirm that I/we wish to apply for Membership of **ULSTER WOODTURNING** and enclose the appropriate fee. I/We agree to encourage the promotion of woodturning and to abide by the Rules of the club, its policies and constitution.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Signed:** | Click or tap here to enter text. |  | **Date:** | Click or tap here to enter text. |

Please send completed form along with remittance to the Club Treasurer:

**Paul Finlay, 39 Kinbayne Avenue, Greenisland, CARRICKFERGUS, BT38 8SU**

Tel: 07547399533. Email: **treasurer@ulsterwoodturning.co.uk**

**1*This is someone over 18 (under 18’s allowed in FOC, BUT must be accompanied by an Adult)***

**2*This is Husband/Wife or Co-habiting partners***