



First Name _____ Last Name _____

Mailing address _____

City _____ State _____ Zip Code _____

Primary phone (_____) _____ Alternate phone (_____) _____

Email Address _____

Would you like to receive the NTWA newsletter by Email? YES NO (circle one)

Would you like your contact information to be shared in our club directory? YES NO (circle one)

Would you like to actively serve on a committee, give a demonstration, etc.? YES NO (circle one)

How did you learn about NTWA? _____

Please choose up to 4 that are of interest to you:

- | | | |
|---|--|--|
| <input type="checkbox"/> Carving | <input type="checkbox"/> Marquetry/Veneering | <input type="checkbox"/> Toys/Games/Puzzles |
| <input type="checkbox"/> Craft/Boxes | <input type="checkbox"/> Models | <input type="checkbox"/> Wood Turning |
| <input type="checkbox"/> Wood Collecting | <input type="checkbox"/> Musical Instruments | <input type="checkbox"/> Furniture Restoration |
| <input type="checkbox"/> Furniture Building | <input type="checkbox"/> Wood Burning | <input type="checkbox"/> Jewelry |
| <input type="checkbox"/> Tool Collecting/Antiques | <input type="checkbox"/> Woodworking Basics | <input type="checkbox"/> Other _____ |

Woodworking tools you own or know how to use:

- | | | | | |
|--------------------------------------|---|--------------------------------------|--------------------------------------|---------------------------------|
| <input type="checkbox"/> Bandsaw | <input type="checkbox"/> Jointer | <input type="checkbox"/> Shaper | <input type="checkbox"/> Lathe | <input type="checkbox"/> Router |
| <input type="checkbox"/> Table Saw | <input type="checkbox"/> Radial Arm Saw | <input type="checkbox"/> Drill Press | <input type="checkbox"/> Planer | <input type="checkbox"/> CNC |
| <input type="checkbox"/> Disc Sander | <input type="checkbox"/> Multi-tool | <input type="checkbox"/> Scroll Saw | <input type="checkbox"/> Other _____ | |

Would you like a program on any of the above tools? If so, which one(s) _____

Do you have any topic suggestions for our monthly meetings? _____

Neither the Association, its officers, nor the owner of any facility at which any meeting or event occurs will be liable for any injuries or bodily harm resulting from the operation and activities of the Association. I hereby release all such parties from any claim for injuries, bodily harm, or other loss or damage I may suffer in connection with the operation and activities of the Association. Please sign below to agree to this waiver of liability.

Signature: _____ Date _____

The \$36 annual dues are for a twelve-month period, beginning April 1st. New member dues are prorated for the remaining number of months until April of the following year. Payments can be made to the treasurer via cash, check, or PayPal. A custom NTWA name badge is an additional \$5.

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