San Diego Fine Woodworkers Association Membership Application

Print Clearly Date: ____/_____/_____

☐ **NEW** Where did you hear about us? _____

☐ **RENEWAL**

Name: _____
First Middle Last

I would like a membership card for my spouse: _____
Name

Mailing Address: _____

City: _____ State _____ Zip Code _____ -_____

Telephone: (_____)_____-_____

E-Mail Address: _____

Your information will only be shared within this Association and on a need-to-know basis.

Newsletters are posted on the sdfwa.org website. You will be notified when the current newsletter posted.

If you would like to receive a printed newsletter in the mail, please select the appropriate dues below.

☐ **$35 dues for one-calendar year membership**
☐ **$40 dues for one-calendar year with printed newsletter**
☐ **$45 dues for Oct 1 of current year through next calendar year**
☐ **$50 dues for Oct 1 of current year through next calendar year with printed**
☐ **newsletter $70 dues for two-calendar year membership**
☐ **$80 dues for two-calendar year with printed newsletter**

Mail form and payment to: SDFWA P.O. Box 82323 San Diego, CA 92138-2323