

# HANDS ON WOODTURNERS, INC.

## 2026 Membership Application

☐ New Member Application

☐ Membership Renewal

☐ Member Information Change

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Spouses Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: Home: \_\_\_\_\_ Cell: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Are you a member of the American Association of Woodturners (AAW)? Yes: \_\_\_\_\_ No: \_\_\_\_\_

### Membership Type

### Amount

☐ Regular Membership: Open to any person 18 years of age or older who is interested or practices woodturning.  
January - December \$40.00 each  
July - December \$20.00 each

☐ Family Membership: Any person 18 years or older who resides in the same household as the Regular Member.  
January - December \$20.00 each  
July - December \$10.00 each

Family Members Name: 1) \_\_\_\_\_  
2) \_\_\_\_\_

☐ Associate Membership: Open to any person less than 18 years of age, with an interest in woodturning, and sponsored by a Regular Member. No membership fee.

Sponsoring Member's Name: \_\_\_\_\_

TOTAL AMOUNT PAID: \_\_\_\_\_

Make checks payable to HOW and forward with this form to:

**David Licastro  
232 S. Paladinn Cir  
Inverness FL 34453**

☐ CHECK # \_\_\_\_\_  
Payable To: HOW

☐ CASH \_\_\_\_\_

Processed by: \_\_\_\_\_

Date Processed: \_\_\_\_\_