



2026 MEMBERSHIP APPLICATION / RENEWAL

Complete this application by clearly printing the information requested in the spaces below and return the form along with a **\$45** check payable to **Long Island Woodturners** to:

Michael Josiah
1 Cedar St.
North Patchogue, NY 11772

Type: New _____ Renewal _____ Date joined club: _____

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone #: _____

Cell Phone #: _____

Email Address: _____

Emergency Contact Name: _____ Phone #: _____

How would you rate your skill level: _____

What would you hope to gain from the club: _____

Other comments, suggestions, expectations: _____

Are you Interested in participating in our mentoring program? _____