



MEMBERSHIP APPLICATION

MID-AMERICA WOODCARVERS ASSOCIATION, INC.

P.O. BOX 540314, Omaha, NE 68154

Complete this form and return with your payment to the address above. **(\$30)**

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE : _____

PHONE NUMBER: () _____

E-MAIL ADDRESS: _____

Please include \$30.00 Annual Membership Dues.

Make checks payable to Mid-America Woodcarvers Association, Inc. or MAWA.

If you would like a membership card send a self-addressed stamped envelope with your application.