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**Membership Application**

**I hereby apply for membership in the Channel Island Woodturners.**

Dues are \$50 per calendar year, renewable January 1. Dues may be paid to the Secretary at a meeting. Please make checks out to *Channel Islands Woodturners, Inc.* with "CIW Dues" in the memo space.

**By my signature below, I acknowledge that I have read and accepted the bylaws of this chapter. See <http://www.channelislandswoodturners.org/>. Specifically, I agree to the principals expressed in Article XI as printed below.**

**Article XI - Channel Islands Woodturners' Disclaimer**

The Channel Islands Woodturners may not incur debt for its own local activities. However, prudent encumbrances upon the monies currently held in the treasury or upon anticipated dues or event fees may be approved by the Officers of the Chapter in the normal course of business.

By accepting membership each member recognizes and agrees that the Channel Islands Woodturners is not responsible, as an organization, for any legal liability for accidents that occur during events of any kind sponsored by the Local Chapter. The Local Chapter is a group of individuals who accept fiscal and legal responsibility for their own actions. Woodturning is a potentially dangerous activity and members personally accept for themselves the risk of injury by participating in the activities of the Local Chapter. Each member is responsible for his/her own safety and is encouraged to teach and promote safe working methods for others.

The AAW currently provides limited liability coverage to our Local Chapter. This liability policy covers only non-member third parties that might be injured by an AAW member during a public event participated in or sponsored by the Local Chapter. It specifically does not cover injury to members or demonstrators at meetings or activities sponsored or not sponsored by the Local Chapter. It does not cover a Chapter member who is not a member of AAW.

Every chapter member is encouraged to join the American Association of Woodturners (<http://www.woodturner.org/>), our parent organization.

----- for the new member  
----- for the club

Name \_\_\_\_\_ Spouse \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Best Telephone \_\_\_\_\_ Email \_\_\_\_\_

What is/was your vocation? \_\_\_\_\_ How would you like to be involved?

Meetings & demos   Get a mentor   Be a mentor   Teach at Cabrillo   Be an officer   Help out

Signed \_\_\_\_\_