

# British Woodcarvers Association

## Application Form

Please enrol me as a member of the BWA

Surname (Mr/Mrs/Miss) .....

First Name .....

Address .....  
.....  
.....  
.....

Post Code.....

Telephone .....

Email .....

Date of Birth (Junior members only).....

**Category:** Please tick one: Professional Semi-professional Hobbyist Trade

**Subscription Rates:** Full Member £20, Junior Member (11-16 years) £5.

Junior members have full rights, except the right to vote at the AGM.

I enclose my annual subscription of £.....

I wish to belong to ..... Region

(leave blank if not known)

Signed .....

Please return the completed form and your cheque to:-

BWA Membership Secretary

16 Coney Hill Road,

West Wickham,

Kent

BR4 9BX