



**Canberra Spinners and Weavers Inc.
Annual Membership Renewal**

**The Membership Secretary
PO Box 622 DICKSON ACT 2602**

Applicant's Name.....
(As it is to appear on the Membership name Tag)

Address.....
.....

(For Membership List for distribution to members)

Postal Address for Newsletter.....

Phone(h).....(w)

email.....
(Signify whether home or work)

Annual Subscription

Joining fee	\$10	Group Membership	\$40
Ordinary Membership	\$50	Fulltime Student	\$35
Family Membership	\$60	Newsletter only	\$40
Concession (Full /Part Old Age or CES Disability Pensioners)	\$35		

If subscriptions are paid before 31 December 08, a \$5.00 discount will apply to each membership category. Please circle membership category.

Enclosed is my payment of \$..... Cash Cheque Credit Card

I agree to abide by the Rules of the Canberra Spinners & Weavers Association Inc:

Signature.....

For payment by Name on Card..... Bankcard

Credit Card only Card No..... Mastercard

Expiry date.....Signature..... Visacard

- | | | |
|---|---|---|
| I would be interested in assisting with | <input type="checkbox"/> Member's Shop | <input type="checkbox"/> Workshop Tutor |
| Registration of Craft Skills/Interests | <input type="checkbox"/> Ground maintenance | |
| | <input type="checkbox"/> Spinning/weaving | <input type="checkbox"/> Felting |
| | <input type="checkbox"/> Dyeing | <input type="checkbox"/> Colour Design |
| | <input type="checkbox"/> Library | <input type="checkbox"/> Sub Committee |
| | <input type="checkbox"/> Knitting | <input type="checkbox"/> Basket Making |