

## Western Canadian Wheelwright's Association Membership Renewal and New Membership Form

PLEASE PRINT CLEARLY

Date of Application: \_\_\_\_\_  
MONTH DAY YEAR

New Membership:  Family Membership:  Renewal:

Name: \_\_\_\_\_  
LAST NAME GIVEN NAME

Company Name: \_\_\_\_\_  
IF APPLICABLE

Home Address: \_\_\_\_\_ Business Address: SAME AS HOME  OR:

\_\_\_\_\_  
STREET/AVENUE NUMBER & NAME OR P.O. BOX NO.

\_\_\_\_\_  
STREET/AVENUE NUMBER & NAME OR P.O. BOX NO.

\_\_\_\_\_  
CITY/TOWN/VILLAGE

\_\_\_\_\_  
CITY/TOWN/VILLAGE

\_\_\_\_\_  
PROVINCE/STATE POSTAL/ZIP CODE COUNTRY

\_\_\_\_\_  
PROVINCE/STATE POSTAL/ZIP CODE COUNTRY

Telephone: (Please include access codes if applicable)

Home: \_\_\_\_\_  
ACCESS AREA TELEPHONE  
CODE CODE NUMBER

Business: \_\_\_\_\_  
ACCESS AREA TELEPHONE  
CODE CODE NUMBER

Cell Phone: \_\_\_\_\_  
ACCESS AREA TELEPHONE  
CODE CODE NUMBER

Fax: (Please include access codes if applicable)

Home: \_\_\_\_\_  
ACCESS AREA TELEPHONE  
CODE CODE NUMBER

Business: \_\_\_\_\_  
ACCESS AREA TELEPHONE  
CODE CODE NUMBER

Email Address: \_\_\_\_\_  
 Website Address: \_\_\_\_\_

Please notify the Secretary if you do not wish your name to appear as part of the  
 WCWA membership list in *The Traveller* newsletter.     Yes     No

**Annual Membership is \$45; Family Membership is \$65. Additional \$30 for print copy of The Traveller.**

Please send your completed WCWA application, with cheque or money order to:  
 Kris Burkholder, Secretary at Box 2, Site 104, RR #3; Sundre, Alberta TOM 1X0 Canada  
 or e-tsif to: [Wheelwright.Assoc.Treas@gmail.com](mailto:Wheelwright.Assoc.Treas@gmail.com)