## CLASS REGISTRATION—Class Request due back by September 15th

**Need to be a member.** If needed, membership application is below.

First Participant Name:		
Second Participant Name:		
Address:	City:	State:Zip Code:
Phone:	Email:	
First Participant:	Second Participant:	
1st 2 <sup>nd</sup> 3i	rd 1 <sup>st</sup>	2nd 3 <sup>rd</sup>
A. Kolrosing	E. Chip Carving	I. Face Carving
B. Lady Slipper Flower	F. Chipmunk on Base	J. Cottonwood Bark
* **	G. Rosemaling	K. Fan Bird
	H. Garden Gnome	
The cost of the seminar is \$115.00. No	ote: Blank and supply cost	s are not included in the seminar fee and are to be
paid directly to the instructor on the first da		s me not merada in the seminar ree and are to se
Make seminar checks payable to: MWCA	<b>Metro Seminar</b> Amount o	enclosed (no partial payments) \$
The undersigned hereby releases and forever	er discharges the Coon R	apids VFW #9625, 1919 Coon Rapids Blvd
•	<u> </u>	ota Wood Carvers Association, and its instructors
· · · · · · · · · · · · · · · · · · ·	*	emands upon or by reason of damage, loss or injur
sustained by the undersigned at the Metro (		
,	8	, .
Signed First Participant	Signed Second Participant	
Return this form to:		
MWCA Metro Seminar	Office Use Only:	
	Date Received:	
c/o Tom Sheldon	Check #	
640 Monroe St. Apt. 312	Amount: \$	
Anoka, MN 55303	Am	ount: \$
MN Wood Carvers As	sociation Membersl	hip Registration for 2024-2025
Name:	Associate's Name	
Address:	City:	State:Zip Code:
Phone:	Email:	
MWCA State Membership Dues Only	\$7.50	Did Phone/Address/e-mail changed.
Newsletter Subscription Only	\$17.50	YES NO
MWCA State Member dues/newsletter	\$25.00	Change
	\$23.00	Change csed_stamped envelope to Lee Olson, and add

If you like a membership card mailed to you, send a self-addressed, stamped envelope to Lee Olson, and add \$.60 to your dues for postage.