

Circular Sock Knitting Machine Society (CSKMS) Membership Application

Name (please print) _____

Address _____ City _____

State/Province _____ Country _____ Postal Code _____

Phone(s) (Home) _____ (Cell) _____

E-mail _____

Optional information:

CSM(s) you own: _____

Your Ravelry name: _____

Membership choice: (check one)

_____ \$15.00 for dues for one year

_____ \$30.00 for dues for 3 years (one free year!)

Membership is open to individuals who have read and support the bylaws of CSKMS.

Please read the bylaws here and be sure you agree with all their provisions before joining CSKMS. Thank you!

Typing or signing your name in the signature blank will indicate that you have read, understand and support the Bylaws and purposes of CSKMS.

Signature of Applicant

_____ Date _____

Print and send application and check, payable to CSKMS, in the amount of your membership choice (\$15 for one year or \$30 for three years) to:
Circular Sock Knitting Machine Society, c/o Treasurer, Kathy Roletter
651 Ott Street, Harrisonburg, VA, 22801

OR

Send your payment by PayPal to kr2409@gmail.com. Please note: When using PayPal, send payment as a gift to family or friend. Otherwise, CSKMS has to pay a fee to Paypal. (Yes, this is permitted by Paypal for nonprofit clubs. We've checked.) Type your name in the signature space and email the application to Kathy.