



**HEART OF OHIO TOLE, INC.**  
 Membership year is from January 1 to December 31  
**MEMBERSHIP APPLICATION**

NEW MEMBER YEAR \_\_\_\_\_ RENEWAL FOR YEAR 2020

NAME \_\_\_\_\_

(PLEASE PRINT CLEARLY)

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ - \_\_\_\_\_

TELEPHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

CELL PHONE \_\_\_\_\_ ok to put in Membership Manual? YES NO

BIRTHDAY Month \_\_\_\_\_ Day \_\_\_\_\_ RECEIVE NEWSLETTER BY EMAIL? Yes \_\_\_\_\_ No \_\_\_\_\_

RECEIVED MEMBERSHIP MANUAL BY EMAIL? Yes \_\_\_\_\_ NO \_\_\_\_\_

SPOUSE/PARTNER NAME \_\_\_\_\_

TEACHER? Yes \_\_\_ No \_\_\_ CDA \_\_\_ MDA \_\_\_ TDA \_\_\_ OTHER \_\_\_\_\_

Are you a member of any painting group? If so, Group Name \_\_\_\_\_

Heart of Ohio, Inc. is a charitable, non-profit organization (501 (c) (3)). Membership with Heart of Ohio Tole, Inc. is open only to person who submit an appropriate application and pay dues.

Heart of Ohio Tole, Inc. hereby gives notice that various paints, finishes and solvents will be used during meetings, seminars and conventions. Each participant is responsible for assessing their own potential risk of exposure to these products and their components before electing to participate in any event. Heart of Ohio Tole, Inc., its teachers and agents assume no liability for the participant's use or exposure to these paints, finishes or solvents; the same being specifically assumed by the participant.

New/renewal HOOT Membership dues for residents of the U.S.A. are **\$20.00 annually**; outside U.S.A. is \$40.00 (US funds only) annually. Renewal dues must be postmarked by December 1; this does not apply to new members. Checks/money orders should be made payable to Heart Ohio Tole, Inc. If you are unable to come to a HOOT meeting to receive your membership card, it will be your responsibility to send us a self-addressed **stamped** envelope, so that we can mail it to you. Add an additional \$5.00 if you wish to have your Membership Manual mailed to you.

This completed and signed application MUST accompany your payment, to:

**HEART OF OHIO TOLE, INC.**  
**ATTN: MEMBERSHIP CHAIR**  
**P.O. BOX 580**  
**WESTERVILLE, OH 43086-0580**

**Phone: 614-394-8028**  
**Web: [www.HeartOfOhioTole.org](http://www.HeartOfOhioTole.org)**  
**Email: [HOOTTole@gmail.com](mailto:HOOTTole@gmail.com)**

My signature on this application signifies that in accepting membership, I ratify, accept and agree to abide by the bylaws and standing rules of Heart of Ohio Tole, Inc., and observe faithfully the provisions thereof.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**FOR OFFICE USE ONLY**

PAYMENT TYPE: Cash \_\_\_ Check # \_\_\_\_\_ Amount \$ \_\_\_\_\_

Date Received \_\_\_\_\_ Postmark Date \_\_\_\_\_

MEMBERSHIP CARD: Picked Up \_\_\_ Mailed \_\_\_\_\_ MEMBERSHIP MANUAL: Picked Up \_\_\_\_\_ Mailed \_\_\_\_\_