



SNEFA Membership Application

Dues are \$50.00 per year. Registering for the Fall Clinic or the Annual Forging Contest also covers your dues for the year.

Name: _____

Business Name: _____

Address: _____

City: _____

State: _____

Zip: _____

Cell Phone: _____

Other Phone: _____

Email Address: _____

Please send this form and the check to:

Mike Paparo

55 Elbow Rock Road, Chepachet RI 02814

Alternatively, you can contact Mike for Venmo payment options.