

***Application for Membership***  
***January 1- December 31***

**Name:**

**Address:**

**E-mail Address:**

**Telephone: (H)**  
**(W)**

**Employer Address:**

**Position:**

**Number of Years:**

**Are you a NAOT Member?      Yes      No**

**Are you certified (OTC)?      Yes      No**

**New Member**

**Renewal**

**How can NESOT best serve you?**

**Signature:**

**Date:**

**Please return this application with your enclosed fee of \$25.00 made payable to: NESOT.**

**Send your new membership to:**

**Lyle Goodwin  
719 Hollis Rd.  
Hollis, ME. 04042**