



NEW MEMBER APPLICATION



OUR MISSION: TO COLLECT AND SHARE ORANGEVALE'S HISTORY AND TRADITIONS

NAME	PHONE CELL
ADDRESS	PHONE HOME
EMAIL ADDRESS	
EMERGENCY CONTACT	PHONE (CELL or HOME)

HOW DID YOU HEAR ABOUT US?

PREVIOUS VOLUNTEER HISTORY?

WHAT ARE YOUR CURRENT VOLUNTEER INTERESTS & TALENTS?

WE ARE DEPENDENT ON VOLUNTEERS TO ACCOMPLISH OUR MISSION. HOW WILL YOU HELP? PLEASE INDICATE YOUR INTEREST/S BELOW!

LEADERSHIP	ORGANIZE, ARCHIVE & DISPLAY COLLECTION	INTERVIEWING	VIDEOGRAPHY	TECHNOLOGY
FUNDRAISING	RESEARCH	WRITTEN STORYTELLERS	NEWSLETTER	PUBLICITY

DUES ARE COLLECTED ON AN ANNUAL CALENDAR BASIS IN JANUARY - DELINQUENT FEBRUARY 15

INDIVIDUAL - \$25.00 NAME:	\$
FAMILY -\$40.00 (2 ADULTS AT SAME ADDRESS) NAME #1 NAME #2	\$
BUSINESS - \$50.00 NAME:	\$

BY REQUESTING MEMBERSHIP, YOU ARE AGREEING TO BE AN ACTIVE PARTICIPANT TO FURTHER THE WORK OF THE ORANGEVALE HISTORY PROJECT.

SIGNATURE: X	DATE:
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SEND THIS APPLICATION WITH YOUR CHECK TO: **ORANGEVALE HISTORY PROJECT**
C/O Orangevale Chamber of Commerce
P.O. BOX 922, Orangevale, CA 95662

THANK YOU!

MEMBERSHIP COORDINATOR use only – New Member: Name: _____ Check# _____ Cash \$ _____ Signature: _____ Date _____
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