



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	RESEARCH	ORAL INTERVIEWS	VIDEOGRAPHY	TECHNOLOGY
FUNDRAISING	ARCHIVE, CURATE & DISPLAY COLLECTIONS	DOCENT	NEWSLETTER	PUBLICITY

DUES ARE COLLECTED ANNUALLY. January 1 -February 15.

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

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
6920 Hazel Ave
Orangevale, CA 95662

THANK YOU!

MEMBERSHIP COORDINATOR use only – New Member:

Name: _____ Check# _____ Cash \$ _____

Signature: _____ Date _____