



AFFILIATE MEMBERSHIP APPLICATION FORM

Organization name _____

Address _____

City _____ State _____ Zip _____

Website_Address _____

Objectives_or_purposes _____

Number of Members _____

President/Director or Contact Person _____

Phone _____ Email _____

Do you sponsor public events? Please list below showing approximate dates:

Dues are \$10.00 per year. Make check payable to OSFGC, Inc. and mail to Treasurer Margaret Taylor, PO Box 81, Hood River OR, 97031-0003. margaret.taylor4343@gmail.com

For a complete explanation of the dues, see the Affiliate Membership Dues Form on the OSFGC, Inc. website.

Application will be forwarded to the Membership Chairman for approval by the OSFGC Inc. Board of Directors.