

MEMBERSHIP APPLICATION FORM



WWW.OREGONCONSERVATIVECAUCUS.COM

Date:

APPLICANT INFORMATION

Full Name: Email Address:
Contact Number: Current Address:
City: State: Zip Code: County:

REQUIREMENTS

- I AM A REGISTERED REPUBLICAN IN THE STATE OF OREGON.
- I AM SUBMITTING MY MEMBERSHIP FEE.
- I AGREE TO THE TERMS & CONDITIONS AT THE BOTTOM OF THIS PAGE.

REFERENCE

- I KNOW THE FOLLOWING OCC MEMBER AND PRESENT HIM/HER AS A REFERENCE:

MEMBERSHIP PREFERENCE

- I'M JOINING AN EXISTING COUNTY CLUB.
- I'D LIKE TO START A NEW COUNTY CLUB AND AM SUBMITTING SIX OTHER APPLICATIONS TO FORM IT.
- I'M JOINING AS A MEMBER IN A COUNTY WITHOUT A CLUB AND WILL WAIT UNTIL ONE FORMS.
- ASSOCIATE MEMBER.

PAYMENT INFORMATION

MAIL A CHECK FOR \$25 FOR FULL MEMBERSHIP OR \$20 FOR AN ASSOCIATE MEMBERSHIP MADE OUT TO "OREGON CONSERVATIVE CAUCUS" TO:

265 50TH AVENUE NW
SALEM OR 97304

SEE WWW.OREGONCONSERVATIVECAUCUS.COM FOR FULL MEMBERSHIP BENEFITS. MEMBERSHIPS ARE ANNUAL.

FOR CREDIT CARD, PAYPAL OR OTHER PAYMENT FORMS, PLEASE APPLY AND PAY ONLINE.

THE OREGON CONSERVATIVE CAUCUS IS AN OREGON NONPROFIT.
WE EMPOWER CITIZENS TO BECOME COMMUNITY LEADERS WHO PROTECT
CONSTITUTIONAL PRINCIPLES AND CONSERVATIVE VALUES.

TERMS AND CONDITIONS

I have read and agree to abide by the terms and conditions, bylaws, and organizational mission. I give the OCC permission to perform a criminal background check if necessary to approve membership.

Signature