



Membership Application

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Renewal/New \$35 yearly

Name: _____ Date of Birth (DOB) _____

Significant other: _____ Date of Birth (DOB) _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

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Home

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Cell

How would you like to receive your newsletter? Email or US Mail

Would you like to or able to host a General Meeting? Yes or No



Card Number	Expiration Date	
Signature	CVC code	Zip Code

Make checks payable to **Oregon Vintage Machinery Museum** (OVMM)

Mail or submit dues to:

Beckie Blevins
c/o Membership Chairma
12005 NE 73rd St
Vancouver, WA 98682