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| **OREGON TRAIL ROUGH RIDERS** |  |  |
| **ANNUAL MEMBERSHIP FORM 2020** |  |  |
|  |  |  |  |  |  |  |  |
| **NAME** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |  |
|  |  |  |  |  |  |  |  |
| **ALIAS** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |  |
| **SASS#** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |  |  |  |  |
|  |  |  |  |  |  |  |  |
| **ADDRESS** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |  |
|  |  |  |  |  |  |  |  |
| **CITY/STATE/ZIP** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |  |
|  |  |  |  |  |  |  |  |
| **PHONE#** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |  |  |  |
|  |  |  |  |  |  |  |  |
| **E-MAIL** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |  |
|  |  |  |  |  |  |  |  |
| **Single Membership $30.00** |  |  |  |  |
| **Family Membership $45.00** |  |  |  |  |
|  |  |  |  |  |  |  |  |
| **(Family is defined as related persons living in the same household** |  |
| **including children 19 years old and younger.)** |  |  |  |
|  |  |  |  |  |  |  |  |
| **\*\*Please add other family member names and information on back of sheet.** |
|  |  |  |  |  |  |  |  |
| **RO1** | **Please circle** | **Yes** | **No** |  |  |  |
| **RO2** |  |  | **Yes** | **No** |  |  |  |
|  |  |  |  |  |  |  |  |
| **Contact me for RO classes or refreshers (RO1 RO2)**  | **Yes** | **No** |
|  |  |  |  |  |  |  |  |
| **Would you be willing to help or work on projects or committees? Yes** | **No** |
|  |  |  |  |  |  |  |  |
| **Mail or hand completed form to:**  |  |  |  |  |
|  **Belinda Belle 2326 E Colorado Ave Nampa, ID 83686** |  |
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|  |  |  |  |  |  |  |  |