



**P.O. Box 1965, Oakdale, CA 95361**  
**Phone: (209) 543-5434**

*Dedicated to Saving and Improving the Lives of Homeless Pets of Oakdale & Riverbank*

**MEMBERSHIP-ACTIVE MEMBER**

• New • Renewal

*Membership term is January-December. \$20. due by February 15 of membership year.*

*New membership dues paid before October 1- will be applied to current year.*

*Dues paid after October 1- will apply to membership for next calendar year.*

<i>Member Name:</i>			
<i>Street/Mailing Address:</i>			
<i>City:</i>	<i>State:</i>	<i>Zip:</i>	
<i>Home Phone:</i>		<i>Cell Phone:</i>	<i>Best # to call:</i>
<i>Email Address:</i>			
<i>Prior Volunteer Experience:</i>			
<i>A current OSPA member, in good standing, must sponsor ALL new memberships</i>			
<i>Sponsoring Member Signature:</i> _____			<i>Date:</i> _____

**OAKDALE SHELTER PET ALLIANCE COMMITMENT STATEMENT:**

*I acknowledge that OSPA is a working, all-volunteer, non-profit organization. As a member of OSPA, I am will support the goals of OSPA and volunteer on committees/events and attend meetings as much as possible. I agree to abide by OSPA Bylaws and Membership requirements.*

*Applicant Signature:* \_\_\_\_\_ *Date:* \_\_\_\_\_

I commit to volunteering for the following committee/s:

<ul style="list-style-type: none"> <li>•Budget/Finance</li> <li>•Donation Correspondence</li> </ul>	<ul style="list-style-type: none"> <li>•Fundraising</li> <li>•Grant Applications • Sponsor Development</li> <li>•Fundraising Events</li> </ul>	<ul style="list-style-type: none"> <li>• Animal Shelter Support</li> <li>•Special Needs •Facility Improvements</li> <li>•Adoption Promotions</li> </ul>
<ul style="list-style-type: none"> <li>•Marketing</li> <li>•Press Releases/Flyers/Posters</li> <li>•Facebook/Social Media</li> <li>•Website Page Management</li> </ul>	<ul style="list-style-type: none"> <li>•Membership</li> <li>•Membership Outreach</li> <li>•Membership Roster/Dues</li> </ul>	<ul style="list-style-type: none"> <li>•Spay/Neuter Program</li> <li>•Monthly Voucher Distribution</li> <li>•Special Event Spay/Neuter Day</li> <li>•DatabaseManagement</li> </ul>

• Other (Describe) \_\_\_\_\_

Amount Enclosed: \_\_\_\_\_ Date: \_\_\_\_\_ For Membership Year: 20\_\_

*(OSPA Use Only)*

New Member Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

*(OSPA Officer/Board Member)*

Dates Dues Received: \_\_\_\_\_ Date Deposited: \_\_\_\_\_