

## 2018 Honorary Membership Application Form

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Retired

Other  - Please explain current employment status, (for example: list current employer and position or in-transition between jobs): \_\_\_\_\_

Please state why you want to become an Honorary Member of OALPRP: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Please list number of years you have been a member of OALPRP and ways you have contributed to OALPRP (for example Board Member, Committee Member, etc.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Send this application form to:  
Rural Action  
Attn: Andrea Reany  
9030 Hocking Hills Dr., The Plains, OH 45780

**Annual Honorary Membership Dues for the Year 2018 are \$25.00 and will be due upon approval of application by the OALPRP Board**