

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