



A.B.A.T.E. of Oregon, Inc.
Membership Application

New Member ____ Chapter you wish to join: _____

Additional Chapters you wish to join (\$5.00 each per year): _____

Renewal ____ Membership # _____ Chapter you belong to: _____

Additional Chapters you wish to join (\$5.00 each per year): _____

ABATE Chapters: Central Oregon (Redmond), Douglas Co. (Winchester), Hub City (Albany), Indian Creek*, Josephine Co. (Grant's Pass), Lincoln Co. (Newport), North Coast (Astoria), River City (The Dalles), Southeast Portland (Gresham), Two Rivers (Eugene), Washington Co. (Forest Grove)

Note *: Indian Creek is not an actual Chapter. It is for at-large members who don't belong to a Chapter.

INDIVIDUAL / PLUS 1 NAMES: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE #: (____) - ____ - ____ E-mail: _____

List additional Family members in the same household:

Names: _____

Names: _____

Membership Info & Rates

| # of Members | Type | One Year | Two Years | Three years | Five Years |
|--|------------|----------------------------|----------------------------|----------------------------|----------------------------|
| One | Individual | \$30.00 | \$55.00 | \$80.00 | \$125.00 |
| You & Yours | Plus 1 | \$45.00 | \$80.00 | \$125.00 | \$200.00 |
| The Kids: (Under 18 years old) | Family | Add \$5.00 for each one | Add \$5.00 for each one | Add \$5.00 for each one | Add \$5.00 for each one |
| One * | Supporter | \$100.00 | N/A | N/A | N/A |
| One ** | Life Time | \$400.00 | N/A | N/A | N/A |

* - Supporter groups receive a certificate of appreciation.

* - Individual members of Supporter groups do not get ABATE memberships.

** - Individuals Only

Type of Membership Selected: _____ How Many Years: _____

Number of Members: _____

(Make Checks Payable to: ABATE of Oregon, Inc.)

Total Amount Enclosed : \$ _____

Mail to:

Membership Secretary

ABATE of Oregon, Inc.; 2532 Santiam Hwy. SE #311; Albany, OR 97322