



Oklahoma Avicultural Society

NAME: _____
 ADDRESS: _____
 CITY _____ STATE _____ ZIP _____
 HOME PHONE _____ OTHER PHONE _____
 E-MAIL _____ E-MAIL CONTACT _____

I FOUND OUT ABOUT OAS FROM: _____

MEMBERSHIP: NEW RENEWAL

Memberships are to be renewed annually by January 1. Except for a one-time payment for a life-time membership. (Memberships not renewed by payment of dues by February 15, will be dropped from the rolls) Only first time new member dues will be pro-rated.

CATEGORIES:

_____ REGULAR (individual) (1 vote) \$20.00 _____ STUDENT (Full Time) (1 vote) \$15.00
 _____ FAMILY (One household) (2 votes) \$30.00 _____ LIFE-TIME (1 vote) \$250.00

BREEDERS:

Species you breed: _____

Name of your business or aviary: _____

Phone # if different from above _____

ABOUT YOU & YOUR BIRD(S):

Pet Species you own: _____

Would you be willing to take calls from beginning bird enthusiasts about your species? ___ Yes ___ No

Areas of interest? _____

What type of speakers would you like to hear? _____

Please check any information you DO NOT wish published on the membership roster:

_____ All _____ Address _____ Phone _____ Pet Birds _____ Breeder Birds

I am willing to help with following O.A.S activities:

_____ Donation Table _____ Refreshments _____ Outreach _____ Newsletter Asst.

_____ Write Articles _____ Advertising _____ Solicit Donations _____ Officer

With the enclosed application and membership dues. I agree to abide by the by-laws and standing rules of the Oklahoma Aviculture Society and therefore entitled to the privileges and duties of membership.

Signature: _____ Date: _____

Please mail completed application and check or money order for membership dues to:
OKLAHOMA AVICULTURAL SOCIETY, P.O. BOX 580155, TULSA, OKLA 74158-0155