

**Central Oregon Geological Society (COGS)**

P.O. Box 2154, Bend, Oregon 97709

**Membership Application Form**

<b>Membership Type</b>	<b>Suggested Amount</b>	<input type="checkbox"/> <b>New</b> <input type="checkbox"/> <b>Renew</b>
Individual	\$35	\$_____
Family	\$50	\$_____
Student / Educator	\$20	\$_____
Additional "benefactor" donation		\$_____
Additional "Student Research Grant" donation		\$_____
Additional "K-12 Outreach" donation		\$_____
	<b>Total enclosed</b>	\$_____

Please make your check payable to COGS and mail it and this form, to the above address. Membership runs from January 1st through December 31<sup>st</sup>. New memberships received after August 31<sup>st</sup> shall be applied to the remainder of the current year and the next calendar year. COGS received 501(c)(3) certification from the IRS effective March 19,2018

Thank you for Printing Clearly

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

E-mail \_\_\_\_\_

Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
City State Zip

**Family Memberships**

Spouse/Partner name \_\_\_\_\_

E-mail \_\_\_\_\_

Phone number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**Student Membership**

School name: \_\_\_\_\_

I(we) would like to help with:  Field Trips  Communications  Program  
 Membership  Educational Outreach  Other \_\_\_\_\_