Oregon Voluntary Organizations Active in Disaster

Invoice for Membership Dues
July 1, 2020 – June 30, 2021

Organization: _____

Address: (for receipt) _____

Description	**Amount**
2020/21 Full Membership Dues (Voting/leadership privileges)	*$75.00*
National VOAD-affiliated organizations, state-wide nonprofit 501(c)(3)	
2020/21 Partner or Affiliate Membership Dues (sub-committee privileges)	*$50.00*
Local disaster response organizations	
Government members	
Business members	

Please make check **payable to ORVOAD** and mail within 30 days, along with this application/renewal form to:

Wendy Colvin
10127 S Macksburg Rd
Canby, OR 97013

colvinwe@yahoo.com
Home: (503) 266-1636
Cell: (503) 975-7207

Oregon Voluntary Organizations Active in Disaster 2018/19 Membership Dues

Enclosed is check #_____for: ☐ $75 for Full Membership

☐ $50 for Partner Membership

Organization Name: _____

Contact Name: _____

Address: _____

Phone: _____ **Email:** _____

ORVOAD EIN: 27-15857