**Oklahoma Home and Community Education**

County Membership Form

*Return membership form with dues to county OHCE Treasurer.*

# **MEMBER INFORMATION** New Member or Renewal

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| **Date:** |  |
| **First Name:** |  |
| **Last Name:** |  |
| **Mailing Address:** |  |
| **City:** |  |
| **State:** |  |
| **Zip:** |  |
| **Phone:** |  |
| **Email:** |  |
| **Newsletter:** | Send Outreach Newsletter by email: YES |
| **Group Name:** |  |
| **County Name:** |  |
| **Member Since:** |  |

**VOLUNTARY INFORMATION REQUEST**   
*Equal Opportunity Information Request-you are not required to answer any of these questions.*

Age Range: 19 years & under ; 20-34; 35-44; 45-64; 65-79; 80& over

Gender: Female; Male

Ethnicity Hispanic/Latino: Yes; No

Race (Select one or more):

White  Black/African American  American Indian/Alaska Native

Hawaiian/Pacific Islander  Asian

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| --- |
| Member Signature: |

# **County Use Only Below this Point**