

Membership Application Columbia River Cowboy Heritage Society

Name _____
 Street Address _____
 City _____ State _____ Zip _____
 Telephone _____ Email _____
 URL _____

I (we) want to assist in recognizing and preserving our western and cowboy heritage and I (we) hereby apply for membership in the Columbia River Cowboy Heritage Society as indicated below. I (we) understand that my (our) membership information will appear in the Society Member Directory which will be provided to the members of the Society for non-commercial use.

- Type Membership Individual Adult (\$20/year)
 Youth 18 or less (\$10/ per year)
 Sponsor (negotiable)
 Family (same household) (\$35/year)

Names	Second Person	Third Person	Fourth Person
Applicant (Above)			
Interests (check all that apply)			
<input type="checkbox"/> Poet	<input type="checkbox"/> Poet	<input type="checkbox"/> Poet	<input type="checkbox"/> Poet
<input type="checkbox"/> Songwriter	<input type="checkbox"/> Songwriter	<input type="checkbox"/> Songwriter	<input type="checkbox"/> Songwriter
<input type="checkbox"/> Musician	<input type="checkbox"/> Musician	<input type="checkbox"/> Musician	<input type="checkbox"/> Musician
<input type="checkbox"/> Storyteller	<input type="checkbox"/> Storyteller	<input type="checkbox"/> Storyteller	<input type="checkbox"/> Storyteller
<input type="checkbox"/> Supporting	<input type="checkbox"/> Supporting	<input type="checkbox"/> Supporting	<input type="checkbox"/> Supporting
<input type="checkbox"/> Other (indicate)	<input type="checkbox"/> Other (indicate)	<input type="checkbox"/> Other (indicate)	<input type="checkbox"/> Other (indicate)

Anything else you'd like to share:

Please submit, with payment, to: Keith K. Anderson, 8412 W. Franklin, Pasco, WA 99301

Accepted

Date _____ By _____