



South Oroville African American
Historical Society
MEMBERSHIP APPLICATION

Date _____

Name _____

Address _____

City _____ State _____ Zip Code _____

Phone # _____

E-mail _____

Select Membership Type:

1. Individual-----\$50.00
2. Student (K-12)-----\$20.00
3. Student (College)-----\$30.00
4. Senior (62 and older)-----\$35.00
5. Sustaining-----\$100.00
6. Family-----\$150.00
7. Organization-----\$150.00
8. Life-----\$4000.00

Make checks payable to: **SOAAHS**

Mail checks to: **SOAAHS**
936 18th Street
Oroville, CA 95965

Contact Phone Number: **530 764-6017**