



ASSOCIATED OREGON LOGGERS, INC.

Associated Oregon Loggers was created by loggers, for loggers, for the sole purpose of helping you in your achievement of success.

SUSTAINING MEMBERSHIP APPLICATION

Company Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Office Number: _____ Shop Number: _____

Fax Number: _____ E-Mail Address: _____

AOL's "Mainline" Newsletter is published monthly.

*Please indicate how you'd like to receive this mailing for **above company.***

Mail

Email

Do not send

Primary Contact Persons Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cellular Number: _____

Spouse Name: _____ E-Mail Address: _____

*Please indicate how you'd like to receive the Mainline Newsletter for the **above primary contact.***

Mail

Email

Do not send

Owners Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cellular Number: _____

Spouse Name: _____ E-Mail Address: _____

*Please indicate how you'd like to receive the Mainline Newsletter for the **above owner.***

Mail

Email

Do not send

Owner Signature: _____ Date: _____

For office use only:

Member #: _____

Executive Approval: _____

District: _____

Date: _____

District Rep: _____

Membership Rep: _____

Type of Work (Please check all that apply)

- Timberland** - forest ownership/management, tree farm
- Mill** - sawmill, veneer plant, chip plant, or pulp mill farm or woodlot

Primary Type of Work (Explain)

MEMBERSHIP DUES

AOL's membership year is from July 1st through June 30th of the following year.

SUSTAINING New Member Dues Are: Full Year July 1st - June 30th \$400.00

BASE RATE	
If Join During	Base
August	\$375.00
September	\$345.00
October	\$315.00
November	\$285.00
December	\$255.00
January	\$225.00
February	\$195.00
March	\$165.00
April	\$135.00
May	\$400.00
June	\$400.00

Initiation fee: + \$100.00

Total Amount Due: \$500.00

OR

Fill in Base Rate from left:

Initiation fee: \$100.00

Total Amount Due: _____

THANK YOU FOR JOINING ASSOCIATED OREGON LOGGERS' TEAM!

Please mail your application and dues to:

Associated Oregon Loggers, Inc.

PO Box 12339

Salem, OR 97309-0339

Or fax completed application to: 503-364-0836

VISA

MASTERCARD

Card # _____ Expiration Date: _____ 3-Digit Code: _____

Name on Card: _____ Signature: _____

Address and Zip Code Associated with card: _____
