



# 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 and our "Oregon Professional Logger" Calendar is published monthly.*

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

Mail

Email

Do not send

Please list owners or associates to receive information *(attach additional page if necessary)*:

**Owner/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 Owner/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: \_\_\_\_\_

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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
- 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 1<sup>st</sup> through June 30<sup>th</sup> of the following year.

SUSTAINING New Member Dues Are: Full Year July 1<sup>st</sup> - June 30<sup>th</sup> \$355.00

One time initiation fee: + \$100.00

**Total Amount Due:** \$455.00

**OR**

Fill in Base Rate from left:

One time initiation fee: + \$100.00

**Total Amount Due:** \_\_\_\_\_

<b><u>BASE RATE</u></b>	
<b><u>If Join During</u></b>	<b><u>Base</u></b>
August	\$330.00
September	\$300.00
October	\$270.00
November	\$240.00
December	\$210.00
January	\$180.00
February	\$150.00
March	\$120.00
April	\$ 90.00
May	\$355.00
June	\$355.00

**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: \_\_\_\_\_

Name on Card: \_\_\_\_\_ Signature: \_\_\_\_\_

Zip Code Associated with card: \_\_\_\_\_ 3 Digit Code on back of Card: \_\_\_\_\_