

**OLYMPIA STREET ROD ASSOCIATION (OSRA)
MEMBERSHIP APPLICATION
P.O. Box 4155, Tumwater, WA 98501**



Date _____

Name(s) _____
(Mr. and Mrs.)

Address _____

Home Phone # _____ Cell Phone # _____

E-Mail _____ OSRA Sponsor _____

Reason for applying _____

What other hobbies/pastimes do you enjoy? Any special skills? _____

How did you learn about OSRA? _____

Current Street Rod/Vintage Auto Owner? Yes _____ No _____

If yes, Year _____ Make _____ Model _____

Current Annual Dues.....\$40.00 OSRA dues are not refundable

I have reviewed the bylaws of the Olympia Street Rod Association (OSRA) and agree to be bound by all things contained therein, and to faithfully observe the provisions thereof.

Signature(s) of Applicant(s) _____

OSRA Officer Approving Membership _____ Date _____