



RAINDROP CHAPTER MEMBERSHIP APPLICATION 2018

NEW RENEWAL (PLEASE CIRCLE ONE)

Last Name _____ (TDA,CDA,MDA,ADP)(circle if appropriate)

First Name _____ (Teacher)(circle if appropriate)

(For directory purposes only please indicate with a check mark if you wish to be included in the Teacher contact page ____)

Business Name _____

Address _____

City _____ State _____ Zip code _____

Phone _____ Website _____ Email _____

Birthday: Month _____ Day _____ SDP# _____ (Must be a SDP Member to join a chapter)

Type of Membership: (please indicate with a check mark)

Membership \$20 _____ Business \$25 _____ Sponsor \$30 _____

Please indicate with a check mark how you wish to receive your newsletter and/or membership directory.

Newsletter _____ hard copy via Postal Service

_____ Via email

Membership Directory _____ hard copy via Postal Service

_____ read/download from Website

Membership fees are for the current year if received prior to September 1st. After September 1st, dues are processed for the following calendar year. Dues are not prorated. You must be a member in good standing with the Society of Decorative Painters to join the Raindrop Chapter.

Please make checks payable to : **Raindrop Chapter** and **enclose a self-addressed stamped envelope with your payment and this form if you wish to receive your membership card via Postal Service.**

Otherwise, membership cards will be available at the next meeting. Please mail the completed form along with your check to:

Charmaine Bannister

phone: 503 542 7646

20125 S. Ford Ct.

email: blsitw@ccgmail.net

Oregon City, OR 97045