

# CEMETERY ASSOCIATION OF OREGON

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## MEMBERSHIP APPLICATION

Date: \_\_\_\_\_

Name of Cemetery: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_\_) \_\_\_\_\_

Toll free #: (\_\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

Cemetery Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Endowment Care \_\_\_\_\_ Special Irreducible Care \_\_\_\_\_

Special District \_\_\_\_\_ Nonprofit \_\_\_\_\_

### Officers:

President \_\_\_\_\_ Vice President \_\_\_\_\_

Secretary \_\_\_\_\_ Manager \_\_\_\_\_

Sexton \_\_\_\_\_ Other \_\_\_\_\_

Industry Sponsor: \_\_\_\_\_

To the Oregon Cemetery Board of Directors:

Please accept this membership application with our check for dues in the amount of \$105.00 plus \$1.30 per number of annualized services (burials, entombments, inurnments, and cremations) provided from 01-01-09 through 12-31-09 (maximum of 550 services) providing a one-year membership. When the Board of Directors approves our application, we agree to be governed by the bylaws of the CEMETERY ASSOCIATION OF OREGON and hold true to the Purpose, Principles, and Spirit as adopted by the association at its inception in 1947. We understand that upon approval, we will also be provided with a membership packet and a roster notebook.

We also hereby certify, \_\_\_\_\_ Cemetery  
(Name of cemetery)

Operates in compliance with all statutory laws and ordinances of the State of Oregon and its significant community therein.

\_\_\_\_\_  
Signature and Title of Cemetery Member Applicant

### Dues are payable to:

The Cemetery Association of Oregon

### Please mail completed application to:

1127 North East Spruce Ct. Canby, OR 97013.