



Corvallis Sister Cities Association



MEMBERSHIP FORM

Become a member or renew your membership:

New Membership

Renewal

Name: _____

Address: _____

Phone: _____

Email: _____

All donations to CSCA are tax-deductible. Please check your desired membership level:

Individual \$ 20

Family \$ 35

Friend \$ 50

Sustaining \$ 100

Patron \$ 200

I would like a “**I support CSCA**”
yard sign.

I would like a receipt for a Tax deduction

Please make checks payable to CSCA & mail to: **CSCA, P.O. Box 132, Corvallis, OR 97339.**

Or join online: www.sistercities.corvallis.or.us.

I would like to be involved with:

Gondar

Uzhhorod

Both

As a CSCA member you have opportunities to become involved in areas like project development, cultural outreach, fundraising, and general administration. Please indicate your interest by checking as many boxes as you like.

Serving on the Board or Council

Hosting a visitor

Working on a short-term project

Writing grants

Traveling to one of the sister cities

Interpreting

**Your support makes a difference!
Thank you!**