

Extension Office Use Only
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Initials _____

Return membership form with
dues to county OHCE Treasurer

Oklahoma Home and Community Education COUNTY MEMBERSHIP FORM _____ (year)

Date: _____ New Member: (or) Changes:

First Name: _____ Last Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Gender: Female Male _____

Group Name: _____ Member Since: _____
(year)

E-mail: _____ County: _____

Age Range: (1) 19 Years & Under (2) 20-34 (3) 35-44 (4) 45-64 (5) 65-79 (6)
80 & Over

Send Outreach Newsletter by email YES

VOLUNTARY INFORMATION REQUEST *(Equal Employment Opportunity Information Request)*

Ethnic Data *(select only one):*

- White** (not of Hispanic origin. A person having origins in any of the original peoples of Europe, North Africa, or the Middle East).
- Black** (not of Hispanic origin. A person having origins in any of the black racial groups).
- Asian or Pacific Islander** (A person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent, or the Pacific Islands. This includes, for example, China, Japan, Korea, India, Pakistan, Bangladesh, Sri Lanka [formerly Ceylon], Nepal, Sikkim, Bhutan, Afghanistan, the Philippine Islands, and Samoa).
- American Indian or Alaskan Native** (A person having origins in any of the original peoples of North America, and who maintains cultural identification through tribal affiliation or community recognition).
- Hispanic** (A person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race).

Member Signature _____

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