

Estacada Fungus Association

Formerly The Estacada Festival of the Fungus

Membership Application

Read carefully and return both pages with signature (s) & fees

Contact Information:

First Name:

Last Name:

Mailing Address:

City:

State:

Zip Code: (Please use 9 Zip Code) <https://tools.usps.com/go/ZipLookupAction!input.action?mode=1&refresh=true>

(Please include email address, as this will be the primary means of communication with the association)

Email:

Alt. Email:

Home Phone:

Cell Phone:

Interests (volunteering/participating):

- | | |
|--------------------------------------|---|
| <input type="checkbox"/> Art | <input type="checkbox"/> Hospitality |
| <input type="checkbox"/> Book sales | <input type="checkbox"/> Identification |
| <input type="checkbox"/> Culinary | <input type="checkbox"/> Leadership |
| <input type="checkbox"/> Cultivation | <input type="checkbox"/> Medicinal |
| <input type="checkbox"/> Education | <input type="checkbox"/> Newsletter |
| <input type="checkbox"/> Festival | <input type="checkbox"/> Website |
| <input type="checkbox"/> Field Trips | |

EFA Yearly Membership Fees

Initial Membership:

- \$25 per person
- \$30 per family (Two Adults at the same address and children under 18)
- \$20 for full time Students and Seniors (62+)
- \$35 Associate (Business & Government entity)

Annual Renewal:

- \$15 per person
- \$20 per family (Two Adults at the same address and children under 18)
- \$12 for full time Students and Seniors (62+)
- \$25 Associate (Business & Government entity)

New members joining after September 1st will be paid up to the end of the following year.

Membership run January 1 –December 31

To Join EFA, Complete application & Liability Release Form. Send both forms with fees by mail to:
Estacada Fungus Association PO BOX 1742, Estacada, Oregon 97023

This application includes a Liability release and Promise not to Sue. This must be signed by all the adults joining or renewing membership to the EFA.

