MEMBERSHIP APPLICATION

MAIN STREET COWBOYS P.O. BOX 1002, PENDLETON, OR 97801 | PH. 541-278-9332

E-mail mainstreetcowboys@gmail.com Web site www.mainstreetcowboys.org

INFORMATION FOR APPLICANTS:

In order to qualify for acceptance as a member of the Main Street Cowboys, an applicant shall be of good health, of good moral character. All applications received by the Main Street Cowboys will be evaluated and investigated. All qualified applicants will be considered without prejudice for that persons color, creed, national origin, marital status or religious affiliation.

All applicants must serve a one year probation period, at the end of which, service and attendance will dictate acceptance into the organization. Initiation will be on a regular general membership meeting date.

	FIRST			MIDDLE_	
Mailing Address	Home Phone				
E-mail	Work Phone_				
BIRTH DATE:	MARITAL		SPOUSES'	NAME:	
LENGTH OF PENDLETON RE	ESIDENC <u>E</u>				
LIST ADDRESSES YOU HAVE	E RESIDED IN LAST TEN Y	EARS (If	necessary, use reverse side)		
1.				YEARS	
2.				YEARS	
3.				YEARS	
EMPLOYMENT RECORD: explain fully on the reverse sid	•	rged from a	position for cause? Yes		
In the present employer first. In Name of Employer		oyed. (If n	ecessary, use reverse side.)		
Name of Employer	Date fr	om / to Add	Iress		
Name of Employer	Date fr	om / to Add	lress		
Name of Employer 1 2	Date fr	om / to Ado	! !		
Name of Employer 1 2	Date fr	om / to Ado	! ! !		
Name of Employer 1 2 3	Date fr	om / to Ado	! ! !		
Name of Employer 1 2 3	Date from the control of the control	om / to Ado	lress ! ! ! ou or your spouse who have k	nown you for the last 5 years.	
Name of Employer 1 2 3	Date from the control of the control	om / to Ado	lress ! ! ! ou or your spouse who have k	nown you for the last 5 years.	
Name of Employer 1 2 3	Date from the control of the control	om / to Ado	lress ! ! ! ou or your spouse who have k	nown you for the last 5 years.	
Name of Employer 1 2 3 REFERENCES: LIST 3 L 1 2 2	Date from the control of the control	end / to Add	lress ! ! ! ou or your spouse who have k	nown you for the last 5 years.	
Name of Employer 1 2 3 REFERENCES: LIST 3 L 1 2 2	Date from the second se	end / to Add	lress ! ! ! ou or your spouse who have k	nown you for the last 5 years.	
Name of Employer 1 2 3 REFERENCES: LIST 3 L 1 2 2	Date from the second se	end / to Add	lress ! ! ! ou or your spouse who have k Address	nown you for the last 5 years. City	

SUMMARIZE EXPERIENCE, TRAINING AND SPECIAL QUALIFICATIONS WHICH IN YOUR OPINION ESTABLISHES YOUR FITNESS FOR THIS ORGANIZATION.

I understand that the Main Street Cowboys Inc., is an organization founded in 1950 by businessmen in the community for the following purpose: "A co-operative endeavor by civic minded volunteers to promote and publicize the city of Pendleton and its' surrounding areas, and further, to promote the traditional Pendleton spirit of friendliness and good will." I understand that general meetings are held the fourth Tuesday of each month at the Main Street Cowboy office and I am expected to attend these and any special meetings and to participate in all events for which I commit myself. I also understand that I must document all my activities on the MSC activity list during the probationary period. I understand further, that if I am accepted after the probation period, I am expected to wear the traditional shirt and that the shirt is to be worn only when I am attending an official / authorized event. I also understand that I will pay my own expenses in all instances. I further agree that if accepted for membership, I will, at all times, present myself in appearance and conduct, as a worthy representative of the Main Street Cowboys.

Having expressed my understanding of the abo	ve listed conditions, I hereby apply for me	embership.	
APPLICANT SIGNATURE:		_DATE	
PROPOSED BY:		DATE	
BOARD: APPROVED	DISAPPROVED	DATE	
GENERAL MEMBERSHIP APPROVED	DISAPPROVED		_DATE
Date entered on to membership list_			

Applicant or Board Comments: