

Central Oklahoma Society of Tole and Decorative Painters, Inc.
Membership Application

Please Print

Name: _____ Spouse: _____
Last, First

Address: _____

City: _____ State: _____ Zip: _____

Phone Numbers

Home: _____ Work: _____

Cell Phone: _____

E-mail address: _____

Membership type: *(please check one)* New: _____ Renewal: _____

***SDP Membership #:** _____

Birthday: _____ Are you a teacher. _____
(Month) (Day) (yes/no)

Would you be willing to teach or demonstrate at a Chapter Meeting? _____
(yes/no)

Dues are \$15.00 per year and are payable on August 1st of the current year and are delinquent on November 1st of the current year, dues are applicable for the Chapter Fiscal Year from Jan. 1ST – Dec. 31 of the next year. In order to be included in the membership directory we must receive your dues no later than the October Meeting.

SDP membership is a prerequisite to membership in the Chapter.
Please, make certain your dues are current with our parent organization.

<http://www.decorativepainters.org/membership.php>

Mail Application with a check made to COSTDP to the current membership chairperson. Please check the *Chapter Contacts* page on our website <http://www.tolecountry.com> for the current year Membership Chairman information.