



OREGON OCEAN PADDLING SOCIETY

Membership Use Only

Application Date: _____

Payment method:

Check Cash

Credit/Debit

Amount Paid: _____

INDIVIDUAL MEMBERSHIP / \$35 a year

___ New ___ Renewal

Name _____ (required)

Email _____ (required)

Phone _____

FAMILY MEMBERSHIP / Up to 6 family members / \$50 a year

___ New ___ Renewal

Primary Member

Name _____ (required)

Email _____ (required)

Phone _____

Additional Family Members

Name _____ Email _____ (required)

IMPORTANT: Each family member must provide a unique email address. This becomes their OOPS member ID.

KAYAKING PROFESSIONAL MEMBERSHIP / \$16 a year

___ New ___ Renewal

Name _____ (required)

Email _____ (required)

Phone _____

IMPORTANT: Kayaking Professional memberships need to provide a copy of proof of employment as a professional kayak instructor

Mail this completed membership application, payment, checks only (and the kayaking professional proof if appropriate) to:

Oregon Ocean Paddling Society
29030 SW Town Center Loop East
Suite 202, Box 228
Wilsonville, OR 97070

Or bring to the next **OOPS General Meeting**. (check, cash, debit/credit)

Online membership application or renewal www.oopskayak.org/joinoops

Questions? Contact OOPS:

Membership membership@oopskayak.org