



NWGA APPLICATION FOR MEMBERSHIP OR RENEWAL OF MEMBERSHIP

(All information is confidential and not disseminated in any manner)
Web Site: www.nwgapdx.com E-Mail: nwga@nwgapdx.com
Hot Line: (503)533-8787

Board Use Only		
Expiration	_____	
Sent: Pin	Card	Rept
Date Sent	_____	

New Membership ___ Renewal Membership ___

Northwest Gender Alliance is a social, support, and educational group serving the transgendered community in Oregon and Southwest Washington. We welcome as members all individuals concerned with the issues of gender identity and expression regardless of race, religion, sexual orientation or birth gender.

NAME (Legal) _____ CHOSEN NAME _____

NAME TO PUT ON MEMBERSHIP CARD _____

DO YOU WISH TO RECEIVE HARD COPY OF THE NEWSLETTER: **YES / NO** (OTHER WISE YOU CAN DOWNLOAD IT AT THE NWGA WEBSITE)

NWGA MAY USE MY PICTURE AND NAME IN THE NEWSLETTER: **YES / NO** THE NWGA WEBSITE: **YES / NO**

CAN YOU BE CONTACTED BY EMAIL? : **YES / NO**

E-MAIL ADDRESS FOR RECEIVING CLUB NEWSLETTER AND ANNOUNCEMENTS _____

ADD YOUR ADDRESS HERE

NAME _____ ADDRESS _____

CITY _____ STATE _____ ZIP _____ - _____

TELEPHONE # (Optional) (_____) _____ - _____ AND NAME TO ASK FOR (Optional) _____

CODE OF CONDUCT

As a member of NWGA you are expected to respect other members, to honor their privacy and to treat all information that you learn about other members as confidential. In particular, personal information such as a member name, address, telephone number, e-mail address or employer should not be divulged to others including other NWGA members without explicit permission. When at NWGA activities and whenever representing NWGA in other contexts your dress and presentation should be appropriate for the occasion blending with the setting, others present and the overall environment to the extent possible so as not to draw undue attention to you or other members and their guests.

Membership may be withdrawn for failure to abide by the Code of Conduct. All applications are subject to approval by the Board before the application can be accepted. (Present members filling out this form for renewal of membership through yearly dues must also abide by this Code of Conduct.

I have read the above and agree to follow the Code of Conduct. Signed _____ Date ____/____/____

Approved by Board Member _____ Date ____/____/____

Dues are \$40.00 per year. The dues are prorated at \$3.33 per month until the end of the calendar year. The prorated dues are calculated from the month following the date of application. All memberships are renewed before the end of the calendar year.

MAIL THIS APPLICATION WITH U.S. FUNDS TO NWGA P.O. BOX 4928, PORTLAND, OREGON 97208-4928 OR GIVE THIS APPLICATION AND DUES MONEY TO A BOARD MEMBER

ADDITIONAL QUESTIONS

How did you learn about NWGA? _____

What can we do for you as a member of NWGA? _____

What is your birth date? (Optional) Month _____ Day _____ Is it OK to put this in the newsletter? : **YES / NO**

We are always looking for volunteers to help with the activities of NWGA. Can you volunteer some time and/or you talents? _____
Even if it is 15 minutes a month your club needs you for as a member you define what the club is for yourself and others.