



Membership Application

Name: _____ Date: _____

Address: _____

Email: _____

Home Phone: _____ Cell Phone _____

Work Phone: _____

Business Name (if applicable) _____

Occupation or areas of expertise _____

Please describe any civic engagement or volunteer experience:

Why are you interested in joining the Springfield City Club and what can you contribute?

Please list issues of civic interest to you:

1.

2.

3.

Membership types

Family or additional firm memberships require an application for each member. Please submit together.

- Business Sponsor **\$250.00 Annually** (January 1st)
Includes 2 additional firm memberships and Sponsorship marketing.
- Individual Member **\$75.00 Annually**
- Family Membership **\$125.00 Annually**
- Student Membership **\$ 25.00 Annually**
- I am interested in your scholarship program. Please contact me.

Applications submitted during the year will be pro-rated to the month.

Springfield City Club Code of Conduct

As a member of the Springfield City Club I agree:

- To communicate respectfully, directly, and candidly with my fellow members and guests as we review and discuss significant issues involving our community;
- To actively listen;
- To not dominate conversations and allow all parties an opportunity to share their opinion and ask questions; and
- To respect the privacy of all members, businesses, and friends and I will not post, sell, solicit or otherwise, supply member information unless pre-approved by each respective member.

I have read and agree to follow the Springfield City Club Code of Conduct.

Signature

Date

Bring to next meeting OR

Mail to: Springfield City Club, PO Box 234 Springfield OR 97477