



HALF MOON BAY ODD FELLOWS

OCEAN VIEW LODGE 143

MEMBERSHIP APPLICATION

(PLEASE TYPE OR PRINTED LEGIBLY WITH BLACK INK)

Name _____ Date _____

Street Address _____ Date of Birth _____

Mailing Address (if different) _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

Email Address _____

Ocean View Lodge Sponsor _____

Why are you interested in joining HMB Odd Fellows?

What activities would you consider participating in: scholarships, concerts, speakers committee, films, community outreach, other?

Your Signature (sign at interview) _____

Thank you for your interest.

Half Moon Bay Odd Fellows provides donations, support and sponsorship to local civic, educational and charitable groups and to community causes.

We welcome your participation.

A Membership Committee representative and/or your sponsor will keep you updated with the next steps in the application process.

Please submit this completed Membership Application (PDF) by email as an attachment to membership@hmb-odd.org.

or mail a paper copy to:

Ocean View Lodge #143
MEMBERSHIP COMMITTEE
PO Box 712
Half Moon Bay, CA 94019

If you have any questions please contact membership@hmb-odd.org.