

Extension Office Use Only
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Initials _____

**Return membership form with
dues to county OHCE Treasurer.**

**Oklahoma Home and Community Education
OHCE MEMBERSHIP FORM _____**
(Year)

Date: _____ **New Member:** _____ (or) **Changes from last year:** _____

First Name: _____ **Last Name:** _____

Mailing Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Phone: () _____ **Gender:** Female _____ Male _____

Group Name: _____ **Member Since:** _____
(Year)

E-mail: _____ **County:** _____

Age Range: (1) 19 Years & Under _____ (2) 20-34 _____ (3) 35-44 _____ (4) 45-64 _____
(5) 65-79 _____ (6) 80 & Over _____

VOLUNTARY INFORMATION REQUEST (*Equal Employment Opportunity Information Request*)

Ethnic Data (select only one):

_____ **White** (not of Hispanic origin. A person having origins in any of the original peoples of Europe, North Africa, or the Middle East).

_____ **Black** (not of Hispanic origin. A person having origins in any of the black racial groups).

_____ **Asian or Pacific Islander** (A person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent, or the Pacific Islands. This includes, for example, China, Japan, Korea, India, Pakistan, Bangladesh, Sri Lanka [formerly Ceylon], Nepal, Sikkim, Bhutan, Afghanistan, the Philippine Islands, and Samoa).

_____ **American Indian or Alaskan Native** (A person having origins in any of the original peoples of North America, and who maintains cultural identification through tribal affiliation or community recognition).

_____ **Hispanic** (A person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race).

Member Signature _____

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