OHSU School of Medicine	
Alliance A	

	2012-2013 M	EMBERSHIP FORM	$\mathbf{M}$		
www.ohsu.edu/sma		<b>Date</b>			
503 494-4088 Name:					
NAME:		(Last)			
(Street)		(City)		(Zip)	
<b>TELEPHONE:</b> Primary (H,W, C <b>E-mail</b>	Vour Dans	Secondary (H, W,C) _	 ffiliation:	<del></del>	
Your Spouse/Partner's Name Year I first joined SMA:					
-					
ANNUAL DUES ARE \$35 (NOT TAPE Please make check payable to OHS) <u>A</u>	U SCHOOL OF MEDI	CINE ALLIANCE (SMA) & rejoy St, Portland OR 97210	& send with this forn	ı to:	
I AM INTERESTED IN PARTICIPA	ΓING IN THE FOLLOW	VING GROUPS OR COMMI	TTEES:		
Event Planning F Newcomers News	inancial/Fundraising letter Publicat	Long Range Plannii ions Publicity	ng Membe Program0	ership Chocolate Sale	
Blankets and Books for Bal OHSU newborn nursery a	- • • •		d hand-made baby c	lothing for	
Day Book Group – Meets 2	nd Tuesday morning o	f each month in members'	homes		
Evening Book Group – Me	ets 2 <sup>nd</sup> Thursday eveni	ing of each month in memb	ers' homes		
Garden Group – Varied eve	nts and meetings duri	ng the year			
Movie Group – meets 1 <sup>st</sup> M	onday/monthly				
Threads (Knitting Group) –	meets 2 <sup>nd</sup> Wednesday	v/monthly			
Walking Group Tuesda	y/Thursday mornings	in Forest Heights and/or La	ake Oswego		
Bird-watching Group (date	s TBD)				
Gourmet Group (meets mo	nthly)				
Chocolate Sale (mid-Febru	ary)				
I have a home large enough	n for entertaining grou	ips, and would be willing to	consider hosting a	n event	
I would also like to support SMA Student support genera					
I designate this gift in honor of		or in memory of	·		
Please include a **SEPAR	ATE CHECK** naval	ole to <i>OHSU Foundation</i> . a	and mail it to Anne	Yoo as well	