

Orthodox Charitable and Educational Foundation Membership

In support of St Andrew's Camp, Cleveland, New York

I _____ would like to be a member of the Foundation. I understand that such membership carries with it a responsibility to be a supporter of the St Andrew's Camp and its programs. This support will be in the form of active participation on one of the committees, volunteering at the camp before or during the summer program **and /or** supporting the camp financially. I accept this responsibility and am committed to the mission of St. Andrew's Camp for a minimum of two (2) years. Membership will continue as long as some active support is continued annually. Membership allows me to vote at the Annual meeting and after one year, makes me eligible for nomination to the Board of Trustees.

Signed _____ Date _____

Address _____

Contact phone number(s) _____ Home _____ Cell _____

E-mail _____ Fax number _____