Membership Application 2025

Mission Statement

"The Oregon Pork Producers strives to serve all producers regardless of size or production practices, by promoting producer and consumer education, research, animal well-being, marketing and environmental responsibility."

Vision Statement

"Oregon Pork Producers: A strong advocate for the responsible production and marketing of swine and pork in the Pacific Northwest."

DUES: Jan	uary 1 to December 31. Return by February 28 to be inclu	<mark>uded in 2025 Directory.</mark>
OPP MEMBERSHIP TYPE: Please check all that apply		
\$20.00—INDIVIDUAL/FARM MEMBERSHIP	\$5.00 each JUNIOR MEMBERSHIP (21 & under only)	
(considered "regular" membership for voting purposes)	(Jr. Member automatically enrolled in Youth Sweepstakes)	(non-voting membership i.e. feed dealer, meat processor, etc)
• • • • • • • • • • • • • • • • • • • •	be included in Breeder's directory unless parent authorization is given bel name and phone numbers will be published in Breeders Directory and pos	· ·
PARENT/GUARDIAN SIGNATURE for JUNIOR RELEASE	DATE	NUMBER OF SOWS:
PARENT/GUARDIAN SIGNATURE TOT JUNIOR RELEASE	CA Prop 12 certified □Yes □No	BREEDS RAISED (CHECK ALL WHICH APPLY)
FARM/ORGANIZATION	'	☐ BERKSHIRE
		☐ CHESTER WHITE
FIRST & LAST NAME:	SPOUSE OR PARTNER NAME (OR ADDITIONAL JR.):	□ CROSSBRED
	SI OOSE ON FAMILE (ON FIBERION LESIN.).	□ DUROC
	<u> </u>	HAMPSHIRE
JR. MEMBER #1 NAME & DOB:	JR. MEMBER #2 NAME & DOB	☐ LANDRACE
		□ SPOT
ADDRESS	CITY, STATE, ZIP CODE	\ \ \ \ \ \ \ \ \ \ \ YORKSHIRE
		☐ OTHER:
HOME PHONE	CELL PHONE	
		TYPE OF OPERATION/TYPE SOLD
OTHER PHONE Poture this form along with navement via each sho	EMAIL	(CHECK ALL WHICH APPLY)
Return this form along with payment via cash, che Oregon Pork Producers	ck of filotiey order to.	□ BBO
9		
	email: oregonporkproducers@gmail.com	☐ FEEDER PIGS
Gresham, OR 97033		☐ MARKET HOGS
For payment by Credit or Debit Card: TOTAL AMOU	JNT TO CHARGE: \$	☐ PROJECT PIGS
		□ BOAR STUD
NAME AS IT APPREARS ON CREDIT CARD BILL ☐ VISA ☐ MASTERCARD	ADDRESS AS APPREARS ON CC BILL IF DIFFERENT FROM MEMBER ADDR	RESS
Credit Card #	Expiration Date MM/YYYY 3-digit code	en using Venmo, please indicate your name, email or phone