



“Protecting Oregon’s wildlife, habitat, and hunting heritage.”

Clatsop County Chapter
Oregon Hunters Association
Winter 2025

***** *It’s Banquet Season and you’re invited!* *****

Greetings:

Clatsop County Chapter of the Oregon Hunters Association (OHA) will be conducting their annual Membership “Fund-Raising” Banquet - **Saturday, April 5, 2025**. **Buy your tickets now**, mark your Calendar for **April 5th**, and come out at **4:00pm** to the **Clatsop County Fairgrounds** for a fun night of socializing, great food, and win awesome prizes (firearms included) by partaking in games, raffles, and auctions. ***Youth accompanied by Adult OHA members, are encouraged to participate too!***

Oregon Hunters Association is a nonprofit, hunting conservation organization founded in 1983 whose mission is *“Protecting Oregon’s Wildlife, Habitat, and Hunting Heritage”*. In our 40+ years of existence, we’ve helped acquire and maintain wildland access throughout Oregon, completed numerous wildlife conservation projects, advocated for citizen’s right(s) to bear arms, and continue to provide youth (the next generation of Oregon Hunters) with opportunities to learn about safety, hunting, and wildlife conservation.

Will you consider joining us in passing on our proud hunting heritage by attending and/or supporting this year’s banquet fundraiser? If so, please complete and return the attached form(s) with payment or go online to <https://clatsopcountyoha.com/> by **March 29, 2025**. There are limited seats/meal tickets available (400 approx) and they are being sold on 1st come/1st serve basis. ***No meal tickets will be sold at the door.***

Have Questions or Can’t attend but would like to support OHA, the mission, and/or this banquet? Give us a call at (503) 738-6962 or email us at: ClatsopCountyOHA@pacifier.com

Remember, with OHA: “All Proceeds Raised in Oregon – Stay in Oregon.”

Donations are greatly appreciated! Physical item(s) “New” to re-sell and/or monetary contributions to help facilitate banquet prize purchases (youth firearms for example) are tax deductible. All donors are provided with written receipts and Clatsop County Chapter - OHA is a tax exempt 501(c)(3) organization.

Thank you for your Support! - We hope to see you at the Banquet.

Sincerely,

Troy Laws – Clatsop County Chapter President
ClatsopCountyOHA@pacifier.com

“My Banquet Party Attendance FORM”

OHA MEMBERSHIP List/Status – Clatsop Chapter 2025 Banquet

(Please Let Us Know Everyone in Your Party including children 5 yrs & under)

This information is imperative for banquet planning and pre/post banquet contact if needed to make corrections/adjustments.

Party Leaders Name: 1st/Last _____ Address/City _____ Age _____

Phone #/Email: _____ Current OHA Member Y or N if yes, Life__ or Annual__

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1) Guest Name: 1st/Last _____ Address/City _____ Age _____

Phone #/Email: _____ Current OHA Member Y or N if yes, Life__ or Annual__

2) Guest Name: 1st/Last _____ Address/City _____ Age _____

Phone #/Email: _____ Current OHA Member Y or N if yes, Life__ or Annual__

3) Guest Name: 1st/Last _____ Address/City _____ Age _____

Phone #/Email: _____ Current OHA Member Y or N if yes, Life__ or Annual__

4) Guest Name: 1st/Last _____ Address/City _____ Age _____

Phone #/Email: _____ Current OHA Member Y or N if yes, Life__ or Annual__

5) Guest Name: 1st/Last _____ Address/City _____ Age _____

Phone #/Email: _____ Current OHA Member Y or N if yes, Life__ or Annual__

6) Guest Name: 1st/Last _____ Address/City _____ Age _____

Phone #/Email: _____ Current OHA Member Y or N if yes, Life__ or Annual__

7) Guest Name: 1st/Last _____ Address/City _____ Age _____

Phone #/Email: _____ Current OHA Member Y or N if yes, Life__ or Annual__

8) Guest Name: 1st/Last _____ Address/City _____ Age _____

Phone #/Email: _____ Current OHA Member Y or N if yes, Life__ or Annual__

9) Guest Name: 1st/Last _____ Address/City _____ Age _____

Phone #/Email: _____ Current OHA Member Y or N if yes, Life__ or Annual__

10) Guest Name: 1st/Last _____ Address/City _____ Age _____

Phone #/Email: _____ Current OHA Member Y or N if yes, Life__ or Annual__

11) Guest Name: 1st/Last _____ Address/City _____ Age _____

Phone #/Email: _____ Current OHA Member Y or N if yes, Life__ or Annual__

12) Guest Name: 1st/Last _____ Address/City _____ Age _____

Phone #/Email: _____ Current OHA Member Y or N if yes, Life__ or Annual__