



The Granville Gardeners

MEMBERSHIP APPLICATION

Date of Application _____

Name _____ Spouse _____

Address _____

City _____ State _____ Zip Code _____

Phone (h) _____ (w) _____ (c) _____

Email _____

Occupation _____ (If retired, state former occupation)

Interests/Hobbies _____

Special Gardening Interests _____

Club activity interest and Projects (check those which you would like to participate in)

Community Projects/Service Field Trips Garden Tours Hospitality

Membership Newsletter Plant Sale Programs Publicity

Serve as Officer or Board Member Special Projects Website Workshops

Other interests _____

If a new member, how did you find out about the Granville Gardeners? _____

MEMBERSHIP DUES (enclosed)

_____ \$25.00 *Individual Member (calendar year January-December)

_____ \$40.00 *Member and Spouse (Must complete membership form for each member)

_____ \$10.00 *Student Member

Total Enclosed: \$ _____, Check No.: _____, Renewal _____ New Member/s _____

Please make checks payable to: The Granville Gardeners

Mail to: The Granville Gardeners
 c/o Marty Finkel, Membership Chairperson
 3566-B, Hwy. 96
 Oxford, NC 27565
 Phone: 919-693-5873

8/15/13

(GG use only)
Receipt of (Date):
Form: _____
Dues Amount: \$ _____
Cash or Check: _____