

EG Gardeners Annual Membership Form



My name: _____

Mailing Address: _____

Phone number: _____

E-mail Address: _____

The best communication method listed to reach me is via _____

- ☐ Yes, I am a *New Member* and would like to join.
- ☐ Yes, I am an *Existing Member* and would like to renew my membership.
- ☐ Yes, I authorize EG Gardeners to send me electronic news and other information of interest.
- ☐ Yes, I agree to have my name and information published in the Society's Year Book. We do not share our membership information with any individual or organization.
- ☐ Yes, I agree that any photographs taken of me at Society events may be published in Society electronic and hard copy publications.

Signature _____ Date _____

- ☐ Yes, I would love to volunteer, my interests are:
 - ☐ Board ☐ Program ☐ Plant Sales ☐ Community Plantings
 - ☐ Name it--I'm ready to help

- ☐ Yes, my kids would love the **Youth Program:**

Age of youth member: ☐ **6-8 yrs.,** ☐ **9-11 yrs.,** ☐ **12-14 yrs.,** ☐ **15-18 yrs.**

Please check the appropriate (box) for age group.

Name:	Date of Birth:
Name:	Date of Birth:
Name:	Date of Birth:

Type of Membership:

☐ Single \$20.00 ☐ Couple \$25.00 ☐ Family \$30.00 ☐ Youth \$5.00

Method of Payment Option:

Interac e-transfer payment: email account: eggardeners@gmail.com

Security question "What is the Club floral emblem" Security Answer: cornflower

Make cheque payable to EGGHS and mail to PO Box 576, Mount Albert, L0G 1M0

Attend our General Meeting and **pay in person.**

Membership Benefits: Members receive Yearbook, bi-monthly Newsletter and *special discount offers*. Please email us to learn more at eggardeners@gmail.com