

The Gardeners Club of Green Bay, Wisconsin

(affiliated with The Gardeners of America, Inc./Men's Garden Clubs of America, Inc.)

Membership Application

Date _____

Name _____

Address _____

City _____ State _____ ZIP _____

Telephone Nos. (home) _____ (work) _____

E-Mail Address _____

Gardening Interests

Please check all that apply:

- | | | |
|---|--|--|
| <input type="checkbox"/> Annuals | <input type="checkbox"/> Perennials | <input type="checkbox"/> Bulbs |
| <input type="checkbox"/> Fruits and Berries | <input type="checkbox"/> Prairie Plants | <input type="checkbox"/> Roses |
| <input type="checkbox"/> Greenhouse Culture | <input type="checkbox"/> Trees and Shrubs | <input type="checkbox"/> Turf and Garden |
| <input type="checkbox"/> Vegetables | <input type="checkbox"/> Plant Maintenance | <input type="checkbox"/> Indoor Plants |
| <input type="checkbox"/> Plant Diagnostics | <input type="checkbox"/> Landscape Design | <input type="checkbox"/> Other, please
identify interests below |

How did you learn about our club? _____

Recommended by _____

Checklist (for club use only)

<input type="checkbox"/> Application Approved Date _____	<input type="checkbox"/> National Membership Card Received Date _____
<input type="checkbox"/> Type of Membership _____	<input type="checkbox"/> National Membership Card Given Date _____ (initiation)
<input type="checkbox"/> Amount of Dues Paid \$ _____ Year _____	<input type="checkbox"/> Name Tag Ordered Date _____
<input type="checkbox"/> Treasurer Advised (copy of this form with dues) Date _____	<input type="checkbox"/> Name Tag Given to Member Date _____ (initiation)
<input type="checkbox"/> Tiller Editor Advised (give copy of this form) Date _____	<input type="checkbox"/> Official Club Initiation Date _____