



MEMBERSHIP FORM

DATE _____

Last Name _____ First Name _____

Address _____ City _____ Postal Code _____

Phone: _____ E-mail: _____

Annual Membership Dues: (Due March 1, each year) Covers the period March 1 to February 28

\$25.00 (Single) _____ \$40.00 (Family) _____

Payment Options: (Select One)

<p>E-TRANSFER _____</p> <p>E-transfer to: GardenClubPayments@gmail.com</p> <p>(Security question not required)</p>

<p>CHEQUE _____</p> <p>Payable to Kelowna Garden Club Take to General Meeting or mail: Kelowna Garden Club Payments c/o Bev Thomas 343 Cadder Avenue, Kelowna, BC V1Y 5M9</p>
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<p>CASH _____</p> <p>Deliver in person to a General Meeting and give to Membership Coordinator (Bev Thomas) or one of the directors</p>
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Family Membership:

A family is up to three people (minimum age twelve years) residing at the same address.
Please indicate name and contact information for each additional member:

Last Name _____ First Name _____

Phone: _____ E-mail: _____

Last Name _____ First Name _____

Phone: _____ E-mail: _____

This Form must be completed, signed and sent to Bev Thomas either by e-mail, to above address or personally at a meeting.

CONSENT. (Required of each member)

The Kelowna Garden Club collects personal information in order to carry out the business of the club. This information is available to Kelowna Garden Club Directors and some coordinators as necessary for club related activities only. Use of personal information for any other purpose is only allowed with prior consent of the member.

Signature Of Each Member:
