## **Comox Valley Horticultural Society**

Membership Form

## Please Print Clearly

	Calendar Year for Membership: Date completed				
ANNUAL MEMBERSHIP:	New Members	hip	Renewal		
	🗌 \$20.00 Individu	Jal	🗆 \$ 30.00 F	amily*	
Name					
Additional Family Member's					
Address					
City	Postal Code				
Telephone	Email Address				
* Family includes up to two adults a	and all children under the a	age of 18 in the	same household.		
A Members who ha	nnual memberships ave not paid their du and will no long	ues by Janu	ıary 31 <sup>st</sup> will be r	emoved from the soc	iety roster
	Newsletters and	notification	of activities is b	y email only.	
Please indicate the appropri	iate response:				
I will pick up my member	ership card(s) and red	ceipt at the r	ext meeting.		
Mail my membership ca	ard(s) and receipt. I h	ave included	d a self-addressed	d STAMPED envelope.	
I would be willing to vol website, <u>http://comoxvalleyh</u>		rt the club's a	activities. A list o	f volunteer positions ca	in be found on our
Would you like to open your	garden to members?	? Which mo	nth?		
□ April □ May		□ July	□ August	□ September	□ October
Comments or suggestions for	or future topics, work	shops and s	peakers		
Completed membership for	ms along with a chea	ue (please d	o not send cash)	can be mailed to:	
	cultural Society, Box				
The Comox Valley Horti	•				sonal information.
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For CVHS Use:					
Total amount received: \$		Ca	ish	Cheque #	