



Plantation Orchid Society Membership Form

- ❖ **New Member** (date) _____
- ❖ **Renewal** 2019-2020 2020-2021 2021-2022
- ❖ Please print legibly

Annual Membership is from June 1 to May 31 the next year. Individual membership is \$25. For an additional Family member in the same household the fee is \$15.
Return this form with check or cash to the Membership Chair at a meeting or mail to Donna McWilliams, 5931 SW 8th Street, Plantation, FL, 33317

Last Name: _____ **First Name:** _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

E-Mail Address (to receive newsletter) _____

Contact Phone #: _____ **Birthday Month/day** ____ / ____

May we publish your name, address, phone # and email in our society directory? YES NO

ABOUT YOU

- Please indicate your orchid skill level: Beginner Skilled Hobbyist Professional
- Which areas are you interested in obtaining more information?
 - Orchid Care Propagating Showing Managing your Collection

ABOUT THE SOCIETY

Plantation Orchid Society relies on member participation to facilitate our meetings, events, and society management. Please indicate the areas in which you would be willing to participate:

MEETINGS	EVENTS	ADMINISTRATION
<input type="checkbox"/> Raffle Table setup <input type="checkbox"/> Silent Auction table <input type="checkbox"/> Hospitality Table <input type="checkbox"/> Greeter <input type="checkbox"/> Show Table <input type="checkbox"/> Take photos for newsletter <input type="checkbox"/> Membership <input type="checkbox"/> Other:	<input type="checkbox"/> Anniversary Party-June <input type="checkbox"/> POS Auction – October <input type="checkbox"/> Holiday Party- Dec. <input type="checkbox"/> Orchid Shows <input type="checkbox"/> Other:	<input type="checkbox"/> make phone calls <input type="checkbox"/> send emails <input type="checkbox"/> recruiting advertisers / sponsors <input type="checkbox"/> Maintain POS website <input type="checkbox"/> Serve on Board of Directors <input type="checkbox"/> Other:

Plantation Orchid Society
Membership Form

OFFICIAL USE ONLY

<input type="checkbox"/> single (\$25) <input type="checkbox"/> Family member (\$15) Date: _____	New Member: <input type="checkbox"/> cash _____ <input type="checkbox"/> check _____ check # _____
<input type="checkbox"/> single (\$25) <input type="checkbox"/> Family member (\$15) Date: _____	2019-2020: <input type="checkbox"/> cash _____ <input type="checkbox"/> check _____ check # _____
<input type="checkbox"/> single (\$25) <input type="checkbox"/> Family member (\$15) Date: _____	2020-2021: <input type="checkbox"/> cash _____ <input type="checkbox"/> check _____ check # _____
<input type="checkbox"/> single (\$25) <input type="checkbox"/> Family member (\$15) Date: _____	2021-2022: <input type="checkbox"/> cash _____ <input type="checkbox"/> check _____ check # _____