VANCOUVER RHODODENDRON SOCIETY MEMBERSHIP FORM

VANCOUVER Rhododendron SOCIETY **2019**

PLEASE PRINT **DATE** _____

☐ **NEW MEMBER** ☐ **RENEWAL**
(All memberships are for immediate family members in one residence)

LAST NAME _____ **FIRST NAME** _____

LAST NAME _____ **FIRST NAME** _____

ADDRESS _____

CITY, PROV (STATE, COUNTRY) _____

POSTAL CODE _____ **PHONE** _____

EMAIL _____

A Membership Directory is compiled for distribution to Society members only. Do you consent to the inclusion of your name and contact details in the directory?

YES ☐ **NO** ☐ **Preferences (e.g. phone only)**

Please check one type of membership. (ARS/VRS indicates membership in the American Rhododendron Society, of which the Vancouver Rhododendron Society is a Chapter):

☐ **ARS/VRS (includes the quarterly ARS Journal) ……... $ 55.00**

☐ **VRS Chapter (does not include the quarterly ARS Journal) ……. $ 30.00**

☐ **Associate (member of other _____ ARS chapter) ……. $ 15.00**

☐ **Donation to VRS ……. $ _____**

TOTAL $ _____

Cheques payable to Vancouver Rhododendron Society.

Guests are always welcome at our meetings. Further information on programs and benefits of membership is available at *http://www.rhodovanbc.org*

Membership correspondence: Vancouver Rhododendron Society
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(604) 732-9565 kshuster@telus.net