

**GARDEN CLUB OF NIAGARA
MEMBERSHIP APPLICATION FORM**

NAME, FIRST _____ LAST _____

ADDRESS, STREET _____

CITY _____ POSTAL CODE _____

TELEPHONE _____ EMAIL ADDRESS _____

SPONSOR _____ APPLICATION DATE _____

Licence Plate # (for Parking Pass to Niagara Parks for meetings)

1.

2.

HIGHLIGHTS OF THE CLUB

1. Membership dues are \$40.00 annually, (each September). Aprons and pins are also available. Cash or cheque.
2. Meetings are held on the FOURTH MONDAY of the month (except July, August, & December) at 1.00 PM at the Niagara Parks School of Horticulture. This is a handicapped accessible facility.
3. All members are expected to participate in one of the major fundraising events.
4. All members are expected to participate in at least one of our projects per year. Some of these may require physical exertion.
5. Each member is required to support the social club as requested.
6. A member may be absent for ONLY FOUR meetings per year.
7. Resignations are to be in writing.

How did you hear about the club / your reason for joining ?

PLEASE CHECK OFF AREAS OF INTEREST

.... FLORAL DECORATION / floral design / horticulture ...EVENT ORGANIZING ... SPEAKING
.... GIVING DEMONSTRATIONS [example].....
.... MEETING ROOM SET UP & TAKE DOWN SOCIAL committee [SNACK/ BEVERAGES]
.... FUNDRAISING COMMITTEE WORK

PLEASE CONTACT Creena MacNeill at macneillcreena@gmail.com or 905-468-3482 or 289-407-5094 if you have any questions

PLEASE COMPLETE AND RETURN TO Creena MacNeill, 270 Niven Rd., Niagara-on-the-Lake, ON L0S 1J0

DATE RECEIVED _____