



2019 Membership Form and Information Update

PLEASE PRINT

Date: _____

Name (first and last): _____

Returning members: If there are **no changes** to your contact information, please check here

Address: _____ City: _____

Postal code: _____ Email address: _____

Phone: (Home) _____ (Cell) _____ (Bus.) _____

Returning member New member Member since (year): _____

New members, please indicate how you heard about the RHGHS: _____

My gardening skill level is: Novice Intermediate Advanced

My other hobbies and interests are: _____

Joining a team of volunteers is a great way to make new friends!

We always need volunteers. Please check off any activities you are interested in **helping** with:

- | | | |
|---|---|---|
| <input type="checkbox"/> Refreshments | <input type="checkbox"/> Writing articles for the newsletter | <input type="checkbox"/> Manning the society booth for events such as Healthy Yards |
| <input type="checkbox"/> Fundraising | <input type="checkbox"/> Welcoming new members | <input type="checkbox"/> Volunteering as need arises |
| <input type="checkbox"/> Publicity | <input type="checkbox"/> Opening my garden to a members-only garden visit | <input type="checkbox"/> Becoming a board member for the RHGHS |
| <input type="checkbox"/> Planting and maintaining a public garden in town | <input type="checkbox"/> Photographing meetings, flower shows and events | _____ |
| <input type="checkbox"/> Spring plant sale | <input type="checkbox"/> Judging Richmond Hill Blooms | <input type="checkbox"/> At the moment I am not interested in becoming a volunteer |
| <input type="checkbox"/> Assisting with flower shows | | |
| <input type="checkbox"/> Setting up meetings | | |

CONSENT FOR RELEASE OF PERSONAL INFORMATION

I consent to the listing of my phone number in the annual Yearbook: Yes No

I consent to the posting of my phone number in our secure online Membership Directory: Yes No

I consent to the posting of my email address in our secure online Membership Directory: Yes No

I consent to the posting of my postal address in our secure online Membership Directory: Yes No

FOR OFFICE USE:

Single (\$25) Family (\$40) Paid by: Cash Cheque Online

Received by: _____