



# 2020 Membership Form and Information Update

# INDIVIDUAL

**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: \_\_\_\_\_ Phone: (Preferred) \_\_\_\_\_ (Alternative) \_\_\_\_\_

Email address(es): (1) \_\_\_\_\_ (2) \_\_\_\_\_

**Returning member**    **New member**   Member since (year): \_\_\_\_\_

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

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Another society member     | <input type="checkbox"/> Facebook                    | <input type="checkbox"/> Open Gates Garden Tour |
| <input type="checkbox"/> Bulletin board poster      | <input type="checkbox"/> Internet search             | <input type="checkbox"/> Plant sale             |
| <input type="checkbox"/> Community event            | <input type="checkbox"/> Newspaper article           | <input type="checkbox"/> Other: _____           |
| <input type="checkbox"/> Community recreation guide | <input type="checkbox"/> Online gardening newsletter |   |

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"/> Open Gates Garden Tour                           | <input type="checkbox"/> Becoming a board member                                    |
| <input type="checkbox"/> Planting and maintaining a public garden in town | <input type="checkbox"/> Opening my garden to a members-only garden visit | <input type="checkbox"/> Other: _____   |
| <input type="checkbox"/> Spring plant sale                                | <input type="checkbox"/> Photographing meetings, flower shows and events  |   |
| <input type="checkbox"/> Assisting with flower shows                      | <input type="checkbox"/> Judging Richmond Hill Blooms                     | <input type="checkbox"/> At the moment I am not interested in becoming a volunteer  |
| <input type="checkbox"/> Setting up meetings                              |   |   |

## **CONSENT FOR RELEASE OF PERSONAL INFORMATION**

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

I consent to the posting of my email address(es) 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

Renew by December 31: \$25.00    Renew January 1 or after: \$30.00    Two year renewal: \$50.00

**FOR OFFICE USE:**

Paid by:  Cash    Cheque    Online   Received by: \_\_\_\_\_