

Richmond Garden Club Membership / Renewal Form

Name: _____

Address: _____

City: _____ Postal Code: _____ Phone number: _____

Renewal: **YES** How many years have you been a Member? _____

New Member: **YES** How did you hear about us? _____

Membership Fees Single: -\$15.00 | Family: -\$20.00 Paid by Cash ___ Cheque ___

Do you need a name tag? **YES NO** Change of Address: **YES NO**

Please provide your email address where our newsletter can be sent:



This is a volunteer organization. All members are encouraged to volunteer their services in an area of expertise and/or interest.

I would like to volunteer in: _____

Example: Refreshments Raffle; Parlour Shows; Tours; Membership; Newsletter; Guest Speakers.