



South Western Ontario Hosta Society

Membership Application

1. ENTER ALL INFORMATION AS YOU WOULD LIKE IT PRINTED ON THE MEMBERSHIP LIST

First Name: _____ Last Name: _____

Business Name: _____

(IF YOU ARE A HOSTA RETAILER OR GARDEN CENTRE)

Street Address: _____

City: _____ Province: _____ Postal Code: _____

E-Mail: _____ Telephone: _____

Please include my name on the SWOHS membership list _____ (yes/no).

Please make my name available only to SWOHS Directors _____ (yes).

I'm willing to place my garden on the SWOHS "Open Garden" list. Please contact me with details _____ (yes/no).

2. THE DESIRED MEMBERSHIP OPTION (Membership Year is January 1 through December 31):

___ Individual: \$15 for one year

___ Family: \$15 for one year

___ Individual: \$10 (July 1st - Dec. 31st)

___ Family: \$10 (July 1st - Dec 31st)

___ Individual: \$40 for three years

___ Family: \$40 for three years

___ Business: \$30 for one year (includes a listing in our supplier's directory)

3. ADDITIONAL MEMBERS TO BE LISTED WITH APPLICATION:

Family Memberships may include up to 4 people living at the same residence.

Business Memberships may include up to 3 people (any combination of owner(s) or staff)

4. SUBMISSION:

Print this form and mail it to the address below along with a payment based on your membership selection. Please add \$5.00 /year if you wish to have your newsletters mailed (instead of forwarded electronically). Please make your cheque payable to: "South Western OHS".

You will be notified when your membership has been activated. Should you have any questions you can contact:

Mr. Ken Lenz by e-mailing: swohsmembership@gmail.com SWOHS Membership: 133 Baldwin Ave., R.R. #1 Harrow, ONT NOR 1G0