



MEMBERSHIP FORM ROCHESTER GARDEN & FLOWER CLUB



The membership year for the Rochester Garden & Flower Club (RGFC) begins January 1 and ends December 31. Membership in the Minnesota State Horticultural Society (MSHS) is an option with RGFC membership and includes receipt of The Northern Gardener, the MSHS award-winning magazine, along with many other benefits.

(check only one box)	RGFC Only	RGFC + MSHS	(includes <u>The Northern Gardener</u> magazine)
Membership Type	Yearly	Yearly	
Individual	<input type="checkbox"/> \$10	<input type="checkbox"/> \$47	Membership Status
Dual	<input type="checkbox"/> \$13	<input type="checkbox"/> \$53	<input type="checkbox"/> New <input type="checkbox"/> Renewal

Make your check payable to RGFC and mail with this form to Rita Buegler, 3851 Stoney Creek Ln NW, Rochester 55901.

- **THIS FORM IS THE SOLE SOURCE FOR THE CLUB MEMBERSHIP BOOK.**
- **PLEASE COMPLETE EACH SECTION OF THIS FORM (even if you are a current member).**
- **PLEASE PRINT LEGIBLY.**

..... **For Dual Members:**

1. **NAME:** _____

NAME: _____

MAILING ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP CODE:** _____

TELEPHONE(S): **RESIDENCE:** () _____

CELL () _____ () _____

EMAIL address(es): _____

2. Committees: Membership in the Club may be enhanced by participating in at least one committee. The responsibilities of each committee are described in the club directory. Please indicate any committee(s) in which you would like to participate:

<input type="checkbox"/> 1. Calling	<input type="checkbox"/> 9. Mayowood Planters	<input type="checkbox"/> 17. Summer Plant Swap/Social
<input type="checkbox"/> 2. County Fair & Flower Show	<input type="checkbox"/> 10. Membership	<input type="checkbox"/> 18. Trumpet Vine Newsletter
<input type="checkbox"/> 3. County Fairgrounds Planters	<input type="checkbox"/> 11. Publicity	<input type="checkbox"/> 19. Veterans Memorial- Evening
<input type="checkbox"/> 4. Educational Tours	<input type="checkbox"/> 12. RCTC Rose Garden	<input type="checkbox"/> 20. Veterans Memorial- Day
<input type="checkbox"/> 5. Habitat For Humanity	<input type="checkbox"/> 13. Speakers / Programs	<input type="checkbox"/> 21. Workshops
<input type="checkbox"/> 6. Holiday Party	<input type="checkbox"/> 14. Spring Plant Sale	<input type="checkbox"/> 22. YMCA Planters
<input type="checkbox"/> 7. Library	<input type="checkbox"/> 15. Summer Garden Tour	
<input type="checkbox"/> 8. Mayowood Christmas Projects	<input type="checkbox"/> 16. Summer Ice Cream Social	

3. Gardening Experience / Knowledge:

a. Do you have expertise/training in a particular area of gardening? Please indicate: _____

b. If you are a Master Gardener, for which county? _____

c. If you are a landscape professional, name of business: _____

d. If you are a certified Show Judge, for what activity? _____

Office Use Only:

Cash Check # _____ Amount paid: _____ Date Received: _____