

WOLLASTON GARDEN CLUB 2024-2025 NEW MEMBER APPLICATION

	Active Member Dues	\$30
	Total Enclosed	

New members are welcome to apply for membership through December 1st, 2024. Please make checks payable to "Wollaston Garden Club". Bring your check and application form to the next club meeting or mail them both to the Assistant Treasurer, **Marnie Dunn, 31 Washington Park Rd., Braintree, MA 02184**. There is no pro-rating of fees if you do wish to join between December 1 and May 31, so you are encouraged to attend meetings as a guest during that period.

NAME: _____

ADDRESS: _____

TELEPHONE: _____ Cell Phone (if desired): _____

EMAIL: _____

Please list Friends or Family who are WGC members: _____

My Garden Club related interests are: _____

CLUB COMMITTEES: Members must serve on at least two club committees. Please check off the committees you wish to serve on in 2024-2025. Descriptions of Committees are attached. All members are also asked to assist the Hospitality Committee by providing refreshments occasionally during the year.

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|---|--|
| <input type="checkbox"/> Awards/Archives (A) | <input type="checkbox"/> Hospitality: (H) |
| <input type="checkbox"/> Civic Beautification: (CB) | <input type="checkbox"/> Membership (M) |
| <input type="checkbox"/> Conservation (C) | <input type="checkbox"/> Plant Sale (PS) |
| <input type="checkbox"/> Floral Arrangement: (FA) | <input type="checkbox"/> Press & Publicity (P&P) |
| <input type="checkbox"/> Garden Therapy (GT) | <input type="checkbox"/> Program (P) |
| <input type="checkbox"/> Greens Sale (GS) | <input type="checkbox"/> Youth (Y) |
| <input type="checkbox"/> Horticulture (HT) | |

Please let us know whether you normally will attend :

Day Meetings _____, Night Meetings _____, or Both _____. Members are welcome at all meetings, and this does not commit you to one or the other, but is simply to help us plan for the correct number of attendees at each meeting.

***Are you interested in having your garden on a WGC 2025 Summer Garden Tour? _____**

For Office Use: Date Received: _____ Paid: _____ Ck # _____ Initials: _____
Date Board Approved _____ Club Mentor _____