
2012 Peninsula Orchid Society
Membership Application or Renewal
Mail to: Janusz Warszawski - Membership
1227 Monte Verde Ct., Los Altos, CA 94024

Member Information (Please Print):

Name(s) (1) _____ BirthMonth _____
(2) _____ BirthMonth _____

Address: _____
_____ ZipCode _____

Phone: _____

Please Note: We really need your current e-mail address to save postage and printing for *The Sheath*. Also, you will receive last minute information about orchid related events if we have your e-mail address. Your contact information is never sold! Thanks.

E-mail: (1) _____
(2) _____

Type of Membership:

- | | |
|---|---|
| <input type="checkbox"/> Individual \$20.00 | <input type="checkbox"/> Additional Member Same Household \$10.00 |
| <input type="checkbox"/> Senior (55 and over) \$14.00 | <input type="checkbox"/> Additional Member Same Household \$10.00 |
| <input type="checkbox"/> Business \$26.00 | |

Membership Chair's area

Date paid _____ Check No. and amount _____

Receipt No. _____ Cash Amount _____

Our membership year runs from February 1 through January 31 of the next year, regardless of the date on which you begin or renew your membership
