

# *The Jensen Beach Garden Club, Inc*

## APPLICATION FOR MEMBERSHIP

Date\_\_\_\_\_

Name: First\_\_\_\_\_ Last\_\_\_\_\_

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City, State, Zip Code

(\_\_\_\_)\_\_\_\_\_

Telephone

Email

\_\_\_\_\_  
Birth Month & Day (year is not needed)

Please enclose check for Individual (\$32.50) or Spousal (\$37.50) membership payable to Jensen Beach Garden Club, Inc. Dues submitted with this application are for the 2017-2018 Club year ending April 30, 2018.

Mail form and check or give to:

Linda Biagioni-JBGC Treasurer  
4547 NW Red Bay Circle,  
Jensen Beach, Florida 34957.

Please indicate activities in which you have a particular interest:

Fundraising

Photographer

Hands on Gardening

Yearbook

Hospitality

Publicity

Membership

Programs

Signature of Applicant: \_\_\_\_\_