

# *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 a check for \$30 for an annual individual membership (\$35 with a spouse) payable to Jensen Beach Garden Club, Inc. Dues submitted with this application are for the 2021-2022 Club year ending April 30, 2022. Please fill out a separate form for each member.

Print and mail form with check to:

Carol Felix

82 Aqua Ra Drive

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: \_\_\_\_\_