

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:

Dina D'Angelico-Elms
2892 NE Sewalls Landing Way
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: _____