Cactus and Succulent Society of Massachusetts Membership Application



To join the Society, please fill out and return this form to the Membership Secretary, along with your annual membership fee of \$20.

Your membership will run from September 2023 through June 2024

You may pay by check or PayPal.

Pay by Mail:

Mail your application, with a check made out to CSSM, to CSSM Membership Secretary
22 Pondview Road
Norfolk, MA 02056

Pay via PayPal:

Email your application to: (info@cssma.org) PayPal to: CSSMass.Treasurer@gmail.com

All memberships are family memberships which cover any members of a family living in the same household who want to join the Society.

| Date | |
|---|--|
| I am applying for new membership. | I am renewing my membership. |
| Name | |
| Address | |
| Email | Phone |
| Please list additional family member(s) to be included under your membership: | |
| Name | Will attend in-person meetings? (Yes/No) |
| Name | Will attend in-person meetings? (Yes/No) |
| If a new member, how did you hear about CSSM? | |