
Four Seasons Garden Club



Kenosha, Wisconsin

Founded 1963

Membership Application

NAME: _____

ADDRESS: _____

CITY _____ ZIP _____

EMAIL _____

Phone _____ Cell (optional) _____

Birthdate (month and day only) _____

Spouse or partner's name _____

Special talents you bring to the Club _____

I have read carefully the attached *By-Laws of the Four Seasons Garden Club* with particular attention to Article VI, Membership. I understand that the success of the Four Seasons Garden Club depends on the consistent participation of its active members. This means regular attendance at meetings and workshops, active participation on at least one Committee and active participation in all club-wide annual programs such as the Plant Sale, Secret Garden Walk and care of the Margaret Myers Memorial Garden.

I do ___ or do not ___ (please check one) give the Four Seasons Garden Club permission to use photos of me on their web site.

Signature _____ Date _____

Membership Dues

Annual dues are \$25 per year for Active Members. New members joining on or after October 1st of the year will not be required to pay annual dues at the following April Membership renewal date.

Please return the complete Membership Application along with your check payable to "Four Seasons Garden Club" to Rebecca Belmont at the club's next monthly meeting or by mail to:

Rebecca Belmont, Membership
Four Seasons Garden Club
1615 34th Avenue
Kenosha, WI 53144