



# Long Island Master Gardeners 2025 Membership Application

**Membership effective from January 1 to December 31, 2025**

Please check appropriate box: ☐Renewal ☐New

Name \_\_\_\_\_ ☐Master Gardener Graduate, Class year \_\_\_\_\_  
Or ☐Associate Member

If this is for dual membership (2 people in same household), complete below for the second member.

Name \_\_\_\_\_ ☐Master Gardener Graduate, Class year \_\_\_\_\_  
Or ☐Associate Member

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Home phone (\_\_\_\_\_) \_\_\_\_\_ Cell phone (\_\_\_\_\_) \_\_\_\_\_

E-mail \_\_\_\_\_ 2<sup>nd</sup> person \_\_\_\_\_

LIMG would like to know what other organizations members are affiliated with. Many members are active in community and volunteer organizations, and have interesting hobbies. This information will help determine award recipients and who might serve as a group presenter.

**Please list all community and volunteer organizations to which you are a member and any hobbies and skills you may have.** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Annual dues: **\$25.00** per member or **\$35.00** for a couple (significant other relationship) living at the same address. Make check payable to **Long Island Master Gardeners**.

Send this completed membership form and check to:

**Ms. Lorraine Leacock**

**76 Division Avenue**

**Blue Point, NY 11715**

Check number: \_\_\_\_\_

Please note that prompt return of this membership application with your check saves LIMG considerable labor and mailing costs.

Thank you!

Judy Callaway

LIMG Membership Director

*Please list on the other side any comments, suggestions, etc. you may have.*