

Gold Country Montana Master Gardener Association Membership Form

Name: _____

Mailing Address: _____

City/State/Zip: _____ County: _____

Phone: _____ Email: _____

I'm a Master Gardener: Yes No Level: 1 2 3 State Certified: _____

Are you interested in volunteering to help with Association activities? If so, please indicate which committee(s) or activity(ies) you're interested in helping with:

- | | | |
|---|--|---|
| <input type="checkbox"/> Membership | <input type="checkbox"/> Website | <input type="checkbox"/> Fundraising |
| <input type="checkbox"/> Social Events | <input type="checkbox"/> Facebook | <input type="checkbox"/> Writing Gardening Articles |
| <input type="checkbox"/> Annual Symposium | <input type="checkbox"/> Outreach/Marketing | Topics: _____ |
| <input type="checkbox"/> Other Education Events | <input type="checkbox"/> Find MG Volunteer Opportunities | <input type="checkbox"/> Farmer's Market Booth |

What are your horticultural areas of interest? (select all topics you are interested in)

- | | | |
|---|--|--|
| <input type="checkbox"/> Perennial Flowers | <input type="checkbox"/> Vegetable Gardening | <input type="checkbox"/> Irrigation (Drip/Other) |
| <input type="checkbox"/> Annual Flowers | <input type="checkbox"/> Seed Starting | <input type="checkbox"/> Water Conservation |
| <input type="checkbox"/> Arranging Flowers | <input type="checkbox"/> Organic Gardening | <input type="checkbox"/> Season Extension |
| <input type="checkbox"/> Native Plants | <input type="checkbox"/> Propagation/Seed Saving | <input type="checkbox"/> Container Gardening |
| <input type="checkbox"/> Wildlife Resistant Plants | <input type="checkbox"/> Grafting | <input type="checkbox"/> Composting |
| <input type="checkbox"/> Planting to Attract Wildlife | <input type="checkbox"/> Houseplants | <input type="checkbox"/> Honey Beekeeping |
| <input type="checkbox"/> Planting to Attract Birds | <input type="checkbox"/> Turfgrass | <input type="checkbox"/> Native Bees |
| <input type="checkbox"/> Planting for Pollinators | <input type="checkbox"/> Soil and Fertility | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Selecting Trees & Shrubs | <input type="checkbox"/> Botany/Plant Identification | <input type="checkbox"/> I'm interested in these |
| <input type="checkbox"/> Pruning Trees & Shrubs | <input type="checkbox"/> Plant Disease Diagnosis | Alternative Gardening Methods: |
| <input type="checkbox"/> Orchards & Fruit Trees | <input type="checkbox"/> Weed ID & Management | _____ |

Do you have ideas for speakers or topics for future education? (Please list.)

Pay by Debit/Credit Card (\$26 inc. Square processing fee)

Please visit Square to pay fee: <https://bit.ly/GCMMGADues>.

Then:

Renewing Members: No need to send Membership Form.

New Members: Complete this form online, click "**Download**" then "**With Your Changes**" and save completed form. Open saved form from its location, and "**Click Here to Submit**" from your saved form. Form must be downloaded & saved - will not submit from webpage.

Pay by Check

Renewing Members: No new form is necessary, make check payable to and send to:

New Members: Complete Membership Form and include with check for \$25 payable and send to:

Gold Country Montana Master Gardener Assn
c/o Lewis & Clark County Extension
100 W. Custer Ave.
Helena, MT 59602

Or, after paying by Square, you print, scan and email to
goldcountrymastergardener@gmail.com

For office use only:

Form rec'd: _____ Pay method/date: _____

Renew Dates: _____
