

GARDEN CLUB OF CAPE CORAL
Membership Application

Date: _____

Name: _____ Phone: _____

Address: _____ City: _____ Zip: _____

E-Mail: _____ Spouse's Name: _____

Birthday (Month) _____ (Day) _____ Cell Phone: _____

I give my permission for the above information to be published in the Club directory and communication. Yes _____ No _____ Florida resident: Y _____ Snowbird _____

Emergency Contact person: _____ Emergency Phone #: _____
(not for publication) (not for publication)

Are you currently a Master Gardener Yes No Do you belong to other Garden Clubs. Yes No

Dues: ACTIVE PARTICIPATING – Individual - \$30 / Couple - \$45 / Youth - \$15

Please make checks payable to **GARDEN CLUB OF CAPE CORAL** and return to:
Garden Club of Cape Coral
PO Box 152022
Cape Coral, FL 33915-2022

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GARDEN CLUB OF CAPE CORAL

Meets the 2nd Tuesday OF EACH MONTH Sept through May 5:45 pm social 6:15 pm meeting
(no meetings in June, July or August)
At Church of Epiphany, 2507 Del Prado Blvd S., Cape Coral, 33904

WEBSITE: www.gardenclubofcapecoral.com

FOR MORE INFORMATION:

Membership Chair: Terry Fisher 740-679-3583