

West Newbury Garden Club

# Membership Application

**Name**

\_\_\_\_\_

**Address**

\_\_\_\_\_

\_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**Phone** (    ) \_\_\_\_\_

**E-Mail** \_\_\_\_\_

**Would you like to receive the monthly newsletter by (circle one) email or paper?**

**Please tell us briefly why you are interested in joining the club:**

**Are you willing to serve on at least one committee and attend a minimum of 3 meetings a year?**

**What are you most interested in learning about?**

Horticulture

Landscape Design

Ecology

Floral Design

Civic Beautification

Junior Gardening

Other: \_\_\_\_\_

**Do you have any special skills you would like to contribute towards the Club?**

Please return to:

**Linda Schaeffer** PO Box 215, West Newbury, MA 01985

978 363-5251