

Membership Application

Name _____ Spouse _____

Address _____

City _____ State _____ Zip _____

Phone (h) _____ (w) _____ (cell) _____

Email _____ Occupation _____
(if retired, state former occupation)

Gardening Special Interests _____

Hobbies _____

Membership dues are \$30 for individuals and \$45 for families in the 2019 calendar year. Make checks payable to Gardeners of Wake County. Mail application and check to:

Barbara Brown, Membership Chairman
517 Wyndham Drive
Fuquay-Varina, NC 27526-7706