

APPLICATION FOR VFGC LIFE MEMBERSHIP/BOOK OF HONOR

Check One: _____ Life Membership _____ Book of Honor

Name of Honoree _____

Address _____

City _____ State _____ Zip _____

Honoree's Garden Club _____

Honored by _____

District _____

Date of Presentation _____

Surprise? _____ Yes _____ No Club Meeting _____ District Meeting _____

Send life membership pin and card or Book of Honor Card to:

Name _____

Address _____

City _____ State _____ Zip _____

Phone # _____ E-mail _____

CHECK for \$50 payable: VFGC, Inc.

MAIL to VFGC Life Membership Chairman: Susan Grove
P O Box 214
Onancock VA 23417-0214