

MEMBERSHIP APPLICATION

Leaside Garden Society

Jan-Dec 20__

New: _____ Renewal: _____

Date: _____

First Name: _____

Last Name: _____

Address: _____

Postal Code: _____

Phone Number: _____

email address: _____

To unsubscribe from future email communications, email leaside@gardenontario.org, asking to 'Unsubscribe' in the subject line.

(Privacy Policy in effect: your email will NOT be shared with any outside party.)

Single-\$25 _____ Family (18 yrs +)-\$30 _____

Cash: _____ Cheque: _____

A guiding principal of the LGS is that everyone is entitled to be treated with courtesy and respect at all times. All members of LGS are required to adhere to this principal as outlined in the Code of Conduct . (See Policy entitled 'Code of Conduct' on LGS website. A hard copy is available for persual on request). **I agree to adhere to this principal.** _____ (your initials)

*Put the completed form and fee in an envelope and submit to the Membership Co-ordinator

*Mail or drop off to Christine Simmons, #403-928 Millwood Road, Toronto, M4G 1X3