

Credit Valley Horticultural Society Membership Form

New Member(s) and Lapsed Members

- Print off this page.
- Complete the form below. Please print clearly.
- Mail in the completed form along with your payment by cheque.

Note: Family Membership applies to family members living at the same address.

Membership is from January 1 to December 31. You are welcome to join any time during the year.

<i>date joined:</i> _____		CVHS MEMBERSHIP APPLICATION	
New Member: <input type="checkbox"/>	Family <input type="checkbox"/> \$35.00	Senior (65) Family <input type="checkbox"/>	\$25.00
Renewal: <input type="checkbox"/>	Single <input type="checkbox"/> \$25.00	Senior (65) Single <input type="checkbox"/>	\$20.00
<i>(PLEASE PRINT)</i>		<u>First Name</u>	<u>Surname</u>
Name (Mr. / Mrs. / Ms) _____			
Name (Mr. / Mrs. / Ms) _____			
<small>Renewals complete changes only:</small>			
Address _____		City _____	Postal Code _____
☎ Phone # _____		e-mail address: _____	
<i>I would like to receive my CVHS Newsletter and other CVHS communications by e-mail</i> <input type="checkbox"/> Yes <input type="checkbox"/> No			
<i>I would like a meeting reminder by:</i> <input type="checkbox"/> email <input type="checkbox"/> phone <input type="checkbox"/> neither			
I consent to receiving email communications (newsletters, reminders, information, events etc.) from CVHS and understand I may unsubscribe at any time upon email request to creditvalleyhort@gmail.com			
_____ Please sign here.			
Give your completed form with your membership fee to the Membership Director at the next meeting or mail to: Credit Valley Horticultural Society, 6-2400 Dundas St. W., Suite 124, Mississauga, Ontario L5K 2R8			
Director use ONLY: <i>chq cash card email list tag excel newsletter calling list orientation email welcome table</i>			

Last updated 02/02/2024