The NEW ORLEANS ORCHID SOCIETY

PO Box 8152 - Metairie LA 70011-8152



## **Membership Dues**

## **Membership Dues expire on December 31**

Submitting this membership form and dues payment ensures that you will be in good standing, entitling you to receive all current information pertaining to the society by email including the NOOS and SWROGA Newsletters and be able to submit plants for judging.

PLEASE COMPLETE FORM BELOW AND RETURN WITH PAYMENT

A Conteans Orchity of 1	The New Orleans Orchid Society PO Box 8152 - Metairie LA 70011-8152			
				DATE:
MEMBERSHIP FEES:				AMOUNT ENCLOSED
Jan. 1 - Dec. 31: Individual \$20.00 - Household \$25.00 Jul. 1 - Dec. 31: Individual \$10.00 - Household \$12.50				\$
				MAKE CHECK PAYABLE TO:
		PLEASE PRINT C	<u>LEARLY</u>	New Orleans Orchid Society
MEMBER NAME:				DOB (as MM/DD)
2nd MEMBER NAME:				DOB (as MM/DD)
ADDRESS:				
CITY:			ST:	ZIP:
PHONE: (Res.) (	)		(Cell) (	)
EMAIL ADDRESS:				
Existing members	: Pleas	e fill out the above sectior	n if you a	re updating your information.
All members are a of the following:	isked to	o consider joining a comm	ittee. Ple	ease consider joining one or more
Away Shows,	Ch	ristmas Banquet, Men	nbership,	Newsletter,
Orchid Basics	s, R	affle, Refreshments, _	Ribbo	on Judging and Social Media