



Orchid Society of Alberta Membership Application or Renewal

**The Orchid Society of Alberta does not share your personal information.*

Name(s): _____

Address: _____

City: _____ Province: _____

Postal Code: _____ Phone: _____

E-mail: _____

Please Note: Monthly newsletters are distributed by email only

I am a ... (please check) New Member Renewing Member

Membership Fees:

- \$25 single \$30 family (living at same address)
 \$15 senior (65 yrs and older) \$20 senior couple (65 yrs and older)

- Please make cheques payable to the **Orchid Society of Alberta**.
- Memberships are non-refundable.
- **Please Note: All memberships expire September 30th each year.**

Member Information:

1. How long have you grown orchids? _____ How many orchids do you have? _____

2. I grow in a (check one) Windowsill Greenhouse
 Under Lights Other (please specify): _____

3. Topics that would be of interest to me at OSA meetings:

4. I am interested in hosting (billet) a guest speaker for a meeting or annual show: Yes No

Please Bring Form and Fees to Next Meeting OR Mail to:

Orchid Society of Alberta
PO Box 31117
RPO Namao Centre
Edmonton, AB T5Z 3P3