

# Central Vancouver Island Orchid Society

## Membership Form 2014 -2015

Society mailing Address: P.O. Box 1061, Nanaimo, B.C., V9R 5Z2

**web site:** www.cvios.com

Household membership \$25.00 per year (Sept.-Aug.) \_\_\_\_\_

Meetings are held September through June on the Saturday near the middle of the month at the Harewood Activity Centre, 195 Fourth Street, Nanaimo, in the hall on the second floor, doors open at 11:30, with the business meeting starting at 12:00 noon.

**Contact: Dora Glover** Membership Chairperson (250) 754-9634 - Date \_\_\_\_\_

.....  
Name(s) for membership card(s) \_\_\_\_\_

\_\_\_\_\_  
Mailing Address \_\_\_\_\_

\_\_\_\_\_  
Postal Code \_\_\_\_\_

\_\_\_\_\_  
Phone number \_\_\_\_\_

\_\_\_\_\_  
Email address for newsletter \_\_\_\_\_

Where I grow my orchids \_\_\_ Windowsill CHECK ONE OR MORE

\_\_\_ Under Lights

\_\_\_ Greenhouse

\_\_\_ Other \_\_\_\_\_

I have (circle one) (0 - 10), (11 -20), (20 -35), (36 - 50), (50 -100), (100+) orchid plants

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I hereby give permission to have my name address, phone number and email address included in the published membership list that will be distributed to members only.

I ( GIVE ) ( DO NOT GIVE ) permission for publication. (**CROSS OUT ONE PLEASE**)

Date \_\_\_\_\_

Signed \_\_\_\_\_

***Please note if this section is not filled in we cannot list you as a member in the membership list.***