



POTTAWATOMIE GARDEN CLUB

NEW MEMBERSHIP FORM

Date: _____

NAME _____ SPOUSE _____

ADDRESS _____

CITY _____ ZIP CODE +4 _____
include all 9 numbers

CELL PHONE _____ HOME: _____
preferred () check preferred phone contact method preferred ()

E-MAIL ** _____

Level of Membership: *check your level of membership:*

*****NOTE: Please also include your payment for your required (2) 2027 Garden Walk Tickets.*****

New Member/Active: \$40 _____ Associate: \$45 _____ Honorary: (*donation optional*)

Two (2) 2025 Garden Walk Tickets @ \$25.00 Each for \$50.00

Make your check payable to: Pottawatomie Garden Club TOTAL ENCLOSED \$ _____

Please submit membership form and dues to either:

- The Treasurer or Membership Chair at the Pottawatomie Garden Club Meeting
- Mail to Pottawatomie Garden Club, PO Box 424, St. Charles, IL 60174-0424

Active Membership Responsibilities:

- * Timely payment of annual dues
- * Attend minimum of one general meeting, excluding luncheons
- * Participation in biennial Garden Walk activities
- * Participation at least one other PGC activity per year:
 - Planting of the Bridges (May & September)
 - River Corridor native plant maintenance
 - Committee for Spring and/or Fall Luncheon
 - Provide centerpiece arrangement for a luncheon
 - Providing refreshments for a monthly meeting
 - Other activities designated by the Executive Committee

IN CASE OF EMERGENCY, CONTACT:

NAME: _____ PHONE: _____ RELATIONSHIP: _____