



The Key West Garden Club

www.keywestgardenclub.com

1100 Atlantic Blvd., Key West, FL 33040

305-294-3210

keywestgardenclub@gmail.com

Application for Individual or Family Membership

Name: _____ Telephone () _____ - _____
(First and last) Cell phone () _____ - _____

_____ E-mail address _____
Additional Family Member *(if applicable)*

Local Address: _____
(Street) (City) (State) (Zip)

Out of State Address & Telephone Number:

Address: _____
(Street) (City) (State) (Zip)

Telephone: () _____ - _____

Please circle the months when you are in residence in the Keys: All Year or:

Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec

I might enjoy participating in the following: (Please check carefully – This will enable Committee Chairpersons to invite you to participate. Don't wait – VOLUNTEER.)

- Hands-on Gardening Nursery/Propagation Public Relations Floral Design
- Key West Garden Tours Refreshment Committee Interior and Exterior Fort Maintenance
- Communications (contacting Club members) Civic Projects, e.g., Blue Star Memorial

(Applicant's signature)

(Date)

____ Annual Active Membership dues: \$30.00
____ Annual Active Family Membership dues: \$50.00

If you should have any questions, please call 305-294-3210. Please return this application, along with your check, to:
Membership
Key West Garden Club
1100 Atlantic Blvd.
Key West, FL 33040

You may also apply for membership on-line via Paypal or with your credit card at:

<http://keywestgardenclub.com/membership.html>