



THE BONSAI SOCIETY OF SOUTHWEST FLORIDA, INC

Membership Application

DATE: _____

NAME: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE: _____ CELL: _____

EMAIL: _____

May we send you our monthly newsletter by email? YES: _____ NO: _____

OCCUPATION (Optional): _____

AREA OF EXPERTISE (Optional): _____

HOBBIES (Optional): _____

This is a New Application: _____, or a Renewal _____?

This application is for a: _____ Single Membership \$45/year

_____ Family Membership (2 people) \$55/year

If this is a Family Membership, put their name here: _____

After July 1, a Single Membership is \$22.50 and a Family Membership is \$27.50

Do you want a Name Tag (Optional)? _____ \$12

Note: If you are a member of another BSF club or study group and pay BSF dues to that group, you do not have to pay BSF dues to our club. Your cost is then: \$30/year

Make checks payable to: BSSWFL (Bonsai Society of SW FL)

Mail to: Bonsai Society of Southwest Florida

P. O. Box 61945

Fort Myers, FL 33906-1945

239-935-6850 www.bonsaiswfl.org