

Hillsborough Garden Club New Membership

Your responses on this form will help the Club meet your needs as well as provide us with up-to-date information to keep you informed and involved. Thank you!

Name: _____ Date Completed _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home: _____ Cell: _____ Email: _____

Dues: \$35.00

Please make checks payable to:

Hillsborough Garden Club, and send to: PO Box 216, Hillsborough, NC 27278

CURRENT GARDEN INTERESTS:

<input type="checkbox"/> Community/Civic Improvement	<input type="checkbox"/> Floral Design Workshop/Flower Show
<input type="checkbox"/> Community Outreach	<input type="checkbox"/> Environmental/Pollination Concerns
<input type="checkbox"/> Garden Therapy	<input type="checkbox"/> Horticulture
<input type="checkbox"/> Holiday/Candlelight Tour Decorating	<input type="checkbox"/> Other: _____

SKILLS YOU WOULD LIKE TO SHARE:

<input type="checkbox"/> Accounting/Bookkeeping	<input type="checkbox"/> Fundraising
<input type="checkbox"/> Creative Writing	<input type="checkbox"/> Technical/Grant Writing
<input type="checkbox"/> Hospitality	<input type="checkbox"/> Graphic Design/Artist if so, medium? _____
<input type="checkbox"/> Photography/Videography	<input type="checkbox"/> Social Media
<input type="checkbox"/> Historian/Archiving	<input type="checkbox"/> Computer/Web Design
<input type="checkbox"/> Master Gardener	<input type="checkbox"/> Publicity/Newsletters/Posters
	<input type="checkbox"/> Other: _____

GIFTS & ACHIEVEMENTS

_____ Life Member, NGC, SAR, GCNC

_____ HGC Perennial

_____ Certified Landscape Designer

_____ Master Gardener, Where Certified _____

_____ North Carolina Botanical Garden Member _____

_____ Other _____

I grant the Hillsborough Garden Club permission to use my name under membership, personal information and photograph without compensation on their website, social media, and other publications _____ Yes _____ No

Signature: _____