



WINTER PARK  
GARDEN CLUB  
Est. 1922

# WPGC Membership Form

\_\_\_\_\_  
(First) (Middle) (Last) (Spouse)

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip+4: \_\_\_\_\_ - \_\_\_\_\_

Phone: \_\_\_\_\_ / \_\_\_\_\_  
(Home) (Cell)

E-Mail: \_\_\_\_\_

Birthday: \_\_\_\_\_ (year optional)

How did you hear about the WPGC? \_\_\_\_\_

Emergency Contact: \_\_\_\_\_  
(Name) (Phone)

• Are you transferring from another FFGC club? Yes \_\_\_ No \_\_\_

• If so, which club? \_\_\_\_\_

• Do you belong to more than one FFGC club? Yes \_\_\_ No \_\_\_

• If so, which is the primary club? \_\_\_\_\_ District \_\_\_\_\_

• Which is the secondary club? \_\_\_\_\_ District \_\_\_\_\_

\_\_\_\_\_

• Are you a spouse of an existing member? If so, what is her/his name? \_\_\_\_\_

- Conservation, Wildlife       Floral Design       Horticulture
- Environmental Concerns       Fundraising       Landscape Design

## What are your areas of Interests?

**Photo Release Authorization:** On occasion, reporters and guests will visit our events and because we love to show off the wonderful things we do, we are asking your permission to include you in our promotions including our social media and website pages. By signing below, you will voluntarily grant the Winter Park Garden Club to use of your name, photograph, likeness, for the purpose promoting the Winter Park Garden Club

\_\_\_\_\_      \_\_\_\_\_ Opt Out   
(Signature)      (Date)

Include check for \$35.00 payable to: **Winter Park Garden Club** and mail to: Winter Park Garden Club, P.O. Box 272, Winter Park, FL 32790-0272

To be completed by Membership VP:      Membership Activation Date: \_\_\_\_\_ Check #: \_\_\_\_\_  
Date Given: WPGC Yearbook: \_\_\_\_\_ Name tag \_\_\_\_\_