

## WPGC Membership Form

(First)	(Middle)	(Last)	(Spouse)
Street Address:			
City:	State:	Zip+4:	
Phone:	/	(Cell)	
E-Mail:			
Birthday: (year option	nal). How did you	hear about the	e WPGC?
Emergency Contact:			
(Name	2)	(Pho	ne)
<ul> <li>Are you transferring from an</li> <li>If so, which club?</li> <li>Do you belong to more than</li> <li>If so, which is the primary club</li> <li>Which is the secondary club</li> </ul> What are your areas of Int	one FFGC club? Yes	s No	District
<ul><li> □ Conservation, Wildlife</li><li> □ Environmental Concerns</li></ul>	· ·	□ Horti □ Land	culture Iscape Design
Photo Release Authorization: On occass off the wonderful things we do, we are media and website pages. By signing b name, photograph, likeness, for the pu	asking your permission telow, you will voluntarily	o include you in our po grant the Winter Park	romotions including our social
(Signature)		(Date)	Opt Out 🏻
Include check for \$35.0 Winter Park Garder	• •	er Park Garden C	
To be completed by Membership VP:	•	vation Date: C Yearbook:	