



# Gulf Coast Garden Club Membership Application

Date: \_\_\_\_\_ Dues are \$35/year Paid  Cash or  Check # \_\_\_\_\_

Name: \_\_\_\_\_

Florida Address: (Street, City & 9-digit Zip) \_\_\_\_\_

Home phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email Address: \_\_\_\_\_

Emergency Contact - Name & Number: \_\_\_\_\_

Months Spent In Florida - please circle the months you are normally here:

July Aug Sept Oct Nov Dec Jan Feb March April May June

Summer Address & Telephone (For FFGC Communications): \_\_\_\_\_

Please tell us about YOU!

How did you hear about GCGC? \_\_\_\_\_

Guest of whom? \_\_\_\_\_

Previous work/skills/hobbies/volunteer and garden club experience \_\_\_\_\_

Special interests and talents \_\_\_\_\_

GCGC Committees: Your participation is needed for our club's success, and for you to have fun!  
Please choose at least 3, numbering them in order of preference. Committee Chair will contact you  
with more information.

\_\_\_\_ By-Laws \_\_\_\_ Communications/Blossoms Bulletin \_\_\_\_ Community Outreach

\_\_\_\_ Design Workshops \_\_\_\_ Finance \_\_\_\_ Flower Show \_\_\_\_ Green Thumb

\_\_\_\_ Historian \_\_\_\_ Horticulture \_\_\_\_ Hospitality \_\_\_\_ Inspirational Message

\_\_\_\_ Meetings Set Up/Break Down \_\_\_\_ Membership \_\_\_\_ Parliamentarian

\_\_\_\_ Photography \_\_\_\_ Programs \_\_\_\_ Properties \_\_\_\_ Publicity \_\_\_\_ Raffle

\_\_\_\_ Sunshine \_\_\_\_ Tours & Trips \_\_\_\_ Yearbook \_\_\_\_ Website

Are You An NGC Judge? \_\_\_\_ If yes, please indicate: *Student Accredited Life Master Emeritus*

By submitting this application, I affirm that I wish to participate in the activities of the Gulf Coast  
Garden Club and will support its objectives to the best of my ability.

Signature \_\_\_\_\_ Date \_\_\_\_\_