For our NEW BUD Segment on the Information Board at our Meetings

for the SUNSHINE Chairperson's records

BERNARDO GARDENERS CLUB

MEMBERSHIP APPLICATION

Last Name	First	Spouse's Name	
Address			
City	Zip Code	Zip Code	
Phone Number E-M		E-Mail Address	
Phone Number		E-Mail Address	
Please check club act	ivities of interest:	,	
Civic Beautification District Delegate Garden Therapy Garden Tour Historian Holiday Luncheon Horticulture Hospitality Membership	Ph Ph Sc Sc Sr Tr W	Penny PinesPhotographerProgramsPublicityScholarshipsSeedling NewsletterSunshineTripsWebmasterYearbook	
Other interests, hobbies	s, or skills:		

Last Name	First Name	Spouse's Name
Retired professi	on:	
or current profe	ession	
How many child	ren?	
How many gran	dchildren?	
Where did you g	Jrow up?	
When did you m	ove here?	
How did you hea	ar about us?	
Favorite flower		