THE HERB SOCIETY OF AMERICA ("HSA") SOUTH TEXAS UNIT ("STU")

P.O. BOX 6515 HOUSTON, TEXAS 77265-6515



## APPLICATION FOR ACTIVE OR AFFILIATE MEMBERSHIP

Mission Statement: The Herb Society of America is dedicated to promoting the knowledge, use and delight of herbs through educational programs, research and sharing the experience of its members with the community.

NAME:		SPOUSE OR PARTNER:	
Address:		BIRTHDAY (MO./DAY):	
City, State:		ZIP CODE:	
HOME TEL: ( )	WORK TEL:	( )	
CELL N <sup>o</sup> .: ( )	E-MAIL:		
I have attended 3 monthly meetings in the past 12 months. I am applying for Active Membership.			
I am already a member in good standing of the HSA. I am applying for Affiliate membership with the STU. Please indicate the other HSA Unit name or if a Member-at-Large:			
FROM WHOM OR HOW DID YOU HEAR ABOUT THE HERB SOCIETY OF AMERICA OR SOUTH TEXAS UNIT?			
I AM INTERESTED IN: (Check all that apply)			
HERB GARDENING (herbal horticulture) (GAR)	CULINARY U	USES OF HERBS (CUL)	
BOTANY (plant sciences & ecosystems) (BOT)	NUTRITION	AL ASPECTS OF HERBS (NUT)	
COMMERCIAL GROWING (COM)	CRAFTING V	CRAFTING WITH HERBS (CRF)	
HERB GARDEN DESIGN (DES)	—— Herbal-th	HERBAL-THEMED STITCHERY (SEW)	
HERBAL SYMBOLISM AND FOLKLORE (FLK)	—— HERBAL FRA	GRANCE & AROMATHERAPY (FRA)	
—— HERBS THAT HAVE CHANGED HISTORY (HST)		DJECTS FOR CHILDREN (HCH)	
— HERBAL RESEARCH AND WRITING (HRW)			
I HAVE THE FOLLOWING SKILLS THAT MIGHT SUPPORT THE STU AND ITS ACTIVITIES: (Check all that apply)			
ACCOUNTING OR BOOKKEEPING	SOCIAL MEI	DIA	
WEBSITE DESIGN OR MAINTENANCE	OTHER COM	IPUTER SKILLS	
MARKETING / ADVERTISING / PUBLICITY	GRAPHIC DI	ESIGN OR ARTISTIC TALENTS	
BUSINESS / ADMINISTRATIVE EXPERIENCE	EVENT PLAN	INING	
PUBLIC SPEAKING EXPERIENCE	WRITING OF	Editing	
MY FAVORITE VOLUNTEER ACTIVITIES WOULD INCLUDE: (Check all that apply)			
—— HERB FAIR (the STU annual fundraiser)	11.07	OST A MEETING	
HERB DAY (the STU annual educational event)		ORT ARTICLE	
PROVIDE A PROGRAM FOR AN STU MEETING	JOIN A COM	MITTEE	

Please continue to page 2 on the back

## **APPLICATION FOR MEMBERSHIP** (continued)

I UNDERSTAND AND AGREE WITH: (Please INITIAL each one)

- \_\_\_\_\_ The Herb Society of America South Texas Unit is governed by the principles, constitution, and by-laws of The Herb Society of America.
- \_\_\_\_\_ The members of The Herb Society of America will not use the prestige of membership or membership rosters for any advertising of their products or products they may sell.
- \_\_\_\_\_ The Herb Society of America Publications Committee must approve anything that is to be published by a member of a unit in the name of The Herb Society of America for distribution to the public.
- No specific advice or recommendations on the medical or health use of herbs will be given. For more information, the medicinal disclaimer of The Herb Society of America may be found on its website: www.herbsociety.org.
- I understand that as an Active Member I am required to attend at least three (3) meetings yearly and to support the endeavors of the HSA-STU. I also understand that I am expected to participate in our major activities, Herb Fair and Herb Day, either by assisting in the preparation for the events or by working onsite at the events, or both.

I HAVE FULLY AND TRUTHFULLY ANSWERED THE ABOVE QUESTIONS, AND HEREBY APPLY FOR MEMBERSHIP IN THE SOUTH TEXAS UNIT OF THE HERB SOCIETY OF AMERICA. I ACKNOWLEDGE THAT THERE IS AN ANNUAL MEMBERSHIP FEE OF \$67.50 CONSISTING OF \$12.50 FOR THE LOCAL STU AND \$55.00 FOR MEMBERSHIP IN THE NATIONAL HSA. FOR THOSE JOINING MID-YEAR, THE MEMBERSHIP FEE IN THE NATIONAL HSA WILL BE PRO-RATED.

PRINTED NAME

SIGNATURE

DATE

THANK YOU FOR YOUR INTEREST IN THE HERB SOCIETY OF AMERICA - SOUTH TEXAS UNIT