

Georgia Native Plant Society

Membership & Renewal

Memberships are effective for one calendar year, Jan-Dec

Choose membership level: (Select one)

___ Individual (\$30/one year) ___ Family (\$50/one year)

___ Senior, 55 and older (\$25/one year) ___ Full-Time Student (\$25/one year)

___ Lifetime Individual/Family (\$1000)

___ Corporate (organization)(\$250) Organization Name (if applicable): _____

Chapter Affiliation:

___ No Chapter Affiliation ___ West Georgia Chapter ___ Coastal Plain Chapter ___ Redbud Chapter ___ Athens
___ Atlanta Intown ___ North Metro Atlanta ___ Augusta/CSRA ___ Macon ___ North GA Mountains

First Name: _____ Middle Initial: _____ Last Name: _____

If Family/Corporate list additional names, emails, phone numbers : _____

Address: _____

Home Phone: _____ Other Phone: _____

Email Address: _____

(Email address is required if you wish to receive emails and the Electronic Newsletter.)

Indicate if your payment is for a new membership or a renewal.

In addition to my membership, I have included \$ _____ as a donation.

Total Enclosed: _____ Check # _____

Make your check payable to : Georgia Native Plant Society or GNPS

___ Check here if you do NOT wish to receive emails about meetings, plant rescues, work days, and other items of interest to the membership.

___ Check here if you do not wish to be listed on the online (available only to members) membership directory.

Please note that it saves volunteer time if you join online at www.gnps.org. If you cannot do so, mail the completed form to the address below and allow 2 weeks for processing. If you have provided your email, you will get an email when the membership is updated.

GNPS, PO Box 422085, Atlanta, GA 30342-2085

