

**VIRGINIA ORCHID SOCIETY**  
**2018-2019**  
**MEMBERSHIP FORM**

**Please Print Clearly:**

NAME(S): \_\_\_\_\_ Date \_\_\_\_\_

STREET  
ADDRESS: \_\_\_\_\_  
CITY, STATE &  
ZIPCODE: \_\_\_\_\_

PHONE NUMBER(S): \_\_\_\_\_

PREFERRED NUMBER: \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

**Permission to publish e-address in Membership Roster:    Yes        No    (Circle One)**

TYPE OF MEMBERSHIP:	INDIVIDUAL	\$22.50
September thru May	ASSOCIATE	\$30.00 (Residing at same address)
(CIRCLE ONE)	COMMERCIAL	\$30.00

BUSINESS NAME \_\_\_\_\_

The VOS membership year begins September 1 and ends August 31. Please pay your dues before or at the September meeting.

**PLEASE NOTE: Dues for new members joining after January 1st. will be: \$11.25 individual \$15 associate**

IS THIS MEMBERSHIP?        NEW \_\_\_\_\_        RENEWAL \_\_\_\_\_  
Do you want to purchase a permanent name tag? Yes    No    circle one

PLEASE MAKE CHECKS PAYABLE TO:    **THE VIRGINIA ORCHID SOCIETY**

**MAIL TO:**    Daune Poklis  
1806 Windingridge Dr.  
Henrico, VA 23238

*THE VIRGINIA ORCHID SOCIETY IS A 501(c)(3) TAX-EXEMPT ORGANIZATION. YOUR MEMBERSHIP DUES ARE TAX DEDUCTIBLE. THERE ARE NO GOODS OR SERVICES PROVIDED TO YOU IN CONSIDERATION OF THIS CONTRIBUTION.*