

## FENELON FALLS HORTICULTURAL SOCIETY

Membership Registration/Renewal Form New Member  $\Box$  Renewal  $\Box$ 

NAME: Click or tap here to enter text.	
ADDRESS: Street Click or tap here to enter text.	Box No. Click or tap here to enter text.
Town Click or tap here to enter text.	Postal Code Click or tap here to enter text.
EMAIL: Click or tap here to enter text.	PHONE NO. Click or tap here to enter text.
How would you like to be contacted? Email $\ \square$ Phone $\ \square$	
What types of gardening are you interested in? Click or tap here to enter text.	
How did you hear about the Fenelon Falls Horticultural Society? Click or tap here to enter text.	
Do you have any suggestions for speakers or meeting topics? Click or tap here to enter text.	
Is there a particular area of interest you would like to be involved in with our Society?	
Assisting with Community Events   Community Gard	len Planting and Maintenance $\;\Box$
Newsletter/Website Maintenance ☐ Assisting With S	nacks at Meetings
Becoming a Board Member   Assisting with Bo	ard Committees
OTHER (Please specify) Click or tap here to enter text.	
Do you give permission to share your contact information with members of our Society? YES \(\sigma\) NO \(\sigma\)	
Do you give permission to share your contact information with m	embers of our Society? YES 🗆 NO 🗆
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