



FENELON FALLS HORTICULTURAL SOCIETY

Membership Registration/Renewal Form New Member Renewal

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 Phone

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 Garden Planting and Maintenance

Newsletter/Website Maintenance

Assisting With Snacks at Meetings

Becoming a Board Member

Assisting with Board 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 NO

NOTE: On occasion, we take photos of events and meetings. These photos may appear on our website, in our newsletter, the OHA Trillium newsletter, or in other community publications. Please indicate below whether or not you give consent to use your photo in this way. Your contact information will not be used on the website or in any publication without your permission.

I give permission for my photo to be used on sites/newsletters FFHS deems appropriate YES NO

RECORD OF REGISTRATION: To be Completed by Membership Chairperson

Year: 2022-23 Fee: \$20.00 Paid: _____ Initial as Correct : _____ Membership # _____

Year: 2023-24 Fee: _____ Paid: _____ Initial as Correct : _____ Membership # _____

Year: 2024-25 Fee: _____ Paid: _____ Initial as Correct : _____ Membership # _____

Year: 2025-26 Fee: _____ Paid: _____ Initial as Correct : _____ Membership # _____

Year: 2026-27 Fee: _____ Paid: _____ Initial as Correct: _____ Membership # _____