FOR OFFICE USE ONLY CRAGS MEMBERSHIP APPLICATION / RENEWAL FORM Membership number: Please print clearly and bring to the next meeting or mail with a cheque payable to CRAGS to: CRAGS Membership, 607 Willow Park PI SE T2J 1P3 Date received: Note: Memberships can be obtained/renewed on-line at www.crags.ca for faster access Expiry date: Enclosed is: \$\square\$ \$25.00 Individual or \$\square\$ \$30 Family/International Name(s):_____ Amount paid: Address:_____ City: Province: Postal Code: Cash \square Phone:_____Occupation:____ Cheque □ Email: Cheque #:_____ Family Member Email:_ Other: (only if Family memberships require notifications to a second email address) Membership term commences October 1 and expires September 30. Please fill in below for volunteer opportunities. CRAGS VOLUNTEER OPPORTUNITIES This is your society, please volunteer. We need help to make the society work and volunteering brings many additional opportunities to improve your gardening expertise. Please indicate your areas of interest: **Workshops:** planning hosting **Speakers:** \square suggestions \square hosting **Newsletter:** ☐ articles ☐ layout **Open Gardens:** hosting organizing **Raffles:** ☐ meeting ☐ donations Annual Plant Sale: □ Promotional events: Website: □ Advertising: \Box Executive Committee: **Social Events:** Annual Pot-Luck Volunteer Appreciation Party Thank you for volunteering!