



The Friendly Garden Club of Traverse City

NEW MEMBER RECOMMENDATION

You must be an active member for one year to sponsor a new member. Then you may sponsor one new member per year.

Name _____

Husband's name (Optional) _____

Address _____

City _____ Zip _____

Hm Phone _____ Wk Phone _____ Mobile _____

E-Mail _____

Winter Address _____

Winter Phone _____

Months at Winter Address from _____ to _____

Please check the subjects below that are of interest to proposed member.

- | | |
|---|---|
| <input type="checkbox"/> Birds & Butterflies | <input type="checkbox"/> Youth Gardening |
| <input type="checkbox"/> Civic Beautification | <input type="checkbox"/> Landscape Design |
| <input type="checkbox"/> Conservation/Environment | <input type="checkbox"/> Horticulture & Nutrition |
| <input type="checkbox"/> Flower Arranging | <input type="checkbox"/> Other |

REQUIREMENTS:

Yes No

- | | | |
|---|---|---|
| 1. Did the proposed member review the membership requirements? | ☐ | ☐ |
| 2. Have the two sponsors shared membership expectations & club history with member? | ☐ | ☐ |
| 3. Has the proposed member attended two general meetings? | ☐ | ☐ |
- Dates attended _____
- Employment: None Full Time Part Time

Comments: _____

Sponsor's Signatures:

1. _____ 2. _____

Date _____ Date _____

Please return this form to the membership chairman.