



Wisconsin Garden Club Federation
Membership Changes
Wisconsin Gardens (WG) Paper Subscriptions

Date

Please complete this form and send to the following people:

- 1. WGCFF Membership Secretary – information change *≠* \$ and new member**
- 2. WGCFF Treasurer – new member, *≠* \$ include appropriate payment**
- 3. District Treasurer – new member include appropriate payment**

Name

Address

Phone

City

State

Zip

Garden Club

City

District

Email

Please check

New member \$10.00

≠ \$ *h* *o*

Information change only

Total enclosed

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For Office Use Only

Date received

By