

Associate Membership Form

Associate Membership benefits:

- Free one-year garden admission for each member
- Access to RSBG online newsletter
- Online plant, pollen, and seed catalogs
- Copy of the Annual Yearbook, a scientific and educational journal



EMAIL: Info@RhodyGarden.org
PHONE: 253-838-4646

Fax: 253-838-4646
MAILING ADDRESS: P.O. Box 3798 Federal Way, WA 98063

Today's Date: _____

- ☐ Enroll our group as an RSBG Associate member! ☐ Extend our RSBG Associate membership another year!

_____ **Check here if you have a new or revised address.**

Group Name: _____

Contact Name: _____ Title: _____

Address _____

City: _____ Prov./State: _____ Zip / PC: _____ Country : _____

Telephone: _____ - _____ - _____ Fax: _____ - _____ - _____

E-mail: _____

Please check one:

- ☐ **Non-Profit Organization** (\$100) - Up to 100 non-profit organization employees and/or Members will receive free admission to the garden for one year.
- ☐ **Business (\$500)** - Up to 100 business employees will receive free admission to the Garden for one year.
- ☐ **Other** - Please contact Info@RhodyGarden.org if you would like a customized Membership package for your business or organization.

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For Garden entry, Associate members need to check in at the Visitor Center and identify their organization.

- ☐ Enclosed is a contribution of \$ _____
- ☐ Our group is interested in learning about volunteer opportunities.

Payment Information:

- ☐ Enclosed is a check made payable to Rhododendron Species Foundation. *(US funds only, drawn on a US bank.)*

Charge to: ☐ VISA ☐ MASTERCARD

Expires _____

V# _____

3 digit #, located on back of card

Card # _____

Signature _____

For Office Use Only:

New Member number : _____

New Member packet sent on: _____