



Shades of Green Hosta Society of Southeast Minnesota, Inc.

www.soghs.org

Membership Registration Form

PLEASE Complete each section of this form (even if you are a current member)

____ New Member

____ Renewing Member

If a SOGHS member invited you to join, please provide their name: _____

Two types of membership are available:

"Single" (\$10/ year) or "Dual" (for a couple or family, \$15/ year)

The membership year in the Shades of Green Hosta Society (SOGHS) begins January 1 and ends December 31.

Dues are not prorated

A custom engraved plastic magnetic name badge is available for \$6 each additional

Information submitted on this form will be published only on the password-protected Member Directory on the Member's-Only Section of the SOGHS Website.

Member #1

FIRST Name: _____ LAST Name : _____

Street Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (____) ____-____)

Cell Phone: (____) ____-____)

EMAIL Address(es): _____

Member #2

FIRST Name: _____ LAST Name : _____

Street Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (____) ____-____)

Cell Phone: (____) ____-____)

EMAIL Address(es): _____

Please check (x) appropriate line(s)	Membership type/ Name badge	Amount
	Single Membership (1 Yr= \$10; 2 Yr= \$20)	
	Dual Membership 1 Yr = \$15; 2 Yr = \$30)	
	Name Badge Member 1 (\$6)	
	Name Badge Member 2 (\$6)	
	TOTAL	\$ 0

Submit form and payment to:

ATTN. Neva Crocker, Membership Chair

Shades of Green Hosta Society

2639 Viola Heights Dr. NE

Rochester, MN 55906

Received:

____ Cash ____ Check# _____ Date received: _____