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| The Bonsai Society of Greater Kansas City | | | | | | | | | | | | | |
| Membership Application | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | |
| **Date:** |  | | | | | | |
| **Name:** | | |  | | | | | | | | | | | | |
|  | | |  | | | | | | | | | | | | |
| **Address:** | | |
| **City:** | | |  | | | | | **State:** | |  | **Zip Code:** | | |  | |
|  | | |  | | | | |  | |  | | | | | |
| **Telephone:** | | | **e-Mail:** | |
|  | | |  | | | | |  | |  | | | | | |
| **Cell phone:** | | | **Other:** | |
|  | | |  | | | | |  | |  | | | | | |
| **Hobbies/other interests:** | | |  | | | | | | | | | | | | |
| **My Profession:** | | |  | | | | | | | | | | | | |
| **How did you learn about the Society?** | | | | |  | | | | | | | | | | |
|  | | | | |  | | | | | | | | | | |
|  | | |  | | | **X** |  | | **Amount Paid** | | | **Received By:** | | | **Date:** |
| **Society Dues:** | | | Annual Single: | | |  | $25 | | Cash or Check | | |  | | |  |
|  | | | Annual Family\*: | | |  | $30 | | Cash or Check | | |  | | |  |
|  | | | Annual Junior\*\*: | | |  | $15 | | Cash or Check | | |  | | |  |
| **If Family:**  **Additional Names & Relationship(s):** | | | \* Only one position on the Board of Directors per Family Membership  \*\* Under 16 years of age | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| **NOTE:** | | | Annual Dues are payable January 1st and are delinquent April 1st | | | | | | | | | | | | |
|  | | | New members joining after October 1st in the current year will not owe dues the next year. Checks are payable to Bonsai Society of GKC. | | | | | | | | | | | | |
|  | | |  | | | | | | | | | | | | |
| **Mail to:** | | | | C/O Ruth Chiga, Treasurer | | | | | | | | | | | |
|  | | | | 5808 Cherokee Drive | | | | | | | | | | | |
|  | | | | Fairway, KS 66205 | | | | | | | | | | | |
| **e-mail:** | | | | rmchiga@aol.com | | | | | | | | | | | |
| **PLEASE CC** | | | | [samcjmkc@yahoo.com](mailto:samcjmkc@yahoo.com); kjschles@aol.com | | | | | | | | | | | |
| For Society Use Only: | | | | | | | | | | | | | **Date** | | |
| Approved for membership by the Board of Directors or Executive Committee: | | | | | | | | | | | | |  | | |
| Dues Payment deposited:  Check/Cash Deposited: | | | | | | | | | | | | |  | | |
|  | | |