

The Acton Garden Club, Inc. 🧵



Membership Application
Acton Garden Club Web Page: http://www.ActonGardenClub.org

Name	Spouse's Name
Address	
Telephone #	Cell Phone # (to be used only in case of emergencies)
E-Mail	
☐ I would like to receive ele	ectronic notification of any proposed Bylaw amendments and voting (if necessary).
Membership in the Acton	Garden Club requires the following commitment:
*Working four tim	es a year on one of the four Community Service Projects
*Serving on a Host	pitality Committee at one monthly meeting per year
	e Club's annual plant sale fund raiser in May
*Annual Dues of \$	30.00
(The Acton Garden	Club recommends attending four monthly meetings per year)
2.5	(139,13)
Community Service Project	ts: 25 1 2 2
(Please number in order of	preference)
Acton Arboretum Herb	Garden, Main Street and Taylor Road
Civic Beautification	3: 153
Daffodil Run - Meeting	House Hill, Main Street and Nagog Hill Road
	eeting House Hill, Main Street and Nagog Hill Road
7/7/1	and the state of t
e Community Services Coo	rdinator will contact you regarding participation on one of the above committees.
	contact you about serving on a Hospitality Committee.
Are you interested in learning	ng more about the Horticulture Study Group?
	ng more about the Floral Design Study Group?
	ng more about the Floral Besign Study Group: ng more about Gardening with Young People?
	ng more about Garden Therapy-Emerson Hospital?
Are you interested in learning	ig more about Garden Therapy-Emerson Hospitar:
ills or Interests you could	share with the Club? (Technical Skills, Web Design, Graphic Design, Writing, Finance,
otography, Flower Arranging, H	
otography, 1 to wer 7 trianging, 1	initiality, etc.)
1.1	_
I understand that as a mer	mber of the Acton Garden Club, I will fulfill my obligations as stated above.
~· .	Date