

# COS Membership Renewal/ New Member Form

DATE: \_\_\_\_\_ New member ? \_\_\_\_\_ Renewal? \_\_\_\_\_

\_\_\_ \$20 individual annual \_\_\_ \$25 family annual \_\_\_ \$200 individual lifetime \_\_\_ \$250 family lifetime

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ CELL : \_\_\_\_\_

WORK PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_



I would like to receive my newsletter via: Regular mail \_\_\_\_\_ Email \_\_\_\_\_

How long have you grown orchids? \_\_\_\_\_ Approximately how many do you have? \_\_\_\_\_

Which are your favorites? \_\_\_\_\_

How do you grow your orchids? (check all that apply).

\_\_\_\_\_ Under Lights \_\_\_\_\_ Window sill \_\_\_\_\_ Sunroom \_\_\_\_\_ Greenhouse

How did you find out about our Society? \_\_\_\_\_

Do you belong to other orchid societies? \_\_\_\_\_

If Yes, which ones? \_\_\_\_\_

Do you have special skills/interests such as carpentry, electrical, graphic arts, grant writing, marketing, etc.? \_\_\_\_\_

Would you like to volunteer for any of the following? Workshops \_\_\_\_\_ COS Shows \_\_\_\_\_

Fundraising \_\_\_\_\_ Annual Auction \_\_\_\_\_ Away Orchid Shows \_\_\_\_\_ Featured Speaker \_\_\_\_\_

Mentoring \_\_\_\_\_ Outreach Programs \_\_\_\_\_

**Please send your completed form along with check payable to: COS**

**Larry Kuekes  
COS Membership  
118 Camp Meeting Road, Bolton, CT 06043**



**Thank You for your support!**