THE HERB SOCIETY OF GREATER CINCINNATI MEMBERSHIP APPLICATION

ARTICLE 11- PURPOSE

<u>The purpose of the organization is to promote interest in the growing and use of herbs and to exchange information and experiences related to herbs.</u>

The Herb Society of Greater Cincinnati is a dynamic organization that expects all its members to be active participants. A yearly commitment of attendance at four monthly meetings is required, as well as 4 hours of service. Committee Chairs and each member will log the hours given.

AS A MEMBER OF THE HERB SOCIETY OF GREATER CINCINNATI, I WOULD LIKE TO CONTRIBUTE IN THE FOLLOWING AREAS:

- ____ Herbarium/Journaling
- Program Presentation
- ____ Special Events / Fund Raisers
- ____ Hospitality at monthly meetings
- ____ Other educational endeavors or activities specified by the Board

I am also interested in participating in the following FOCUS GROUPS. (Focus Group meetings do not count towards attendance or service hours unless specifically stated.)

___ Crafts __ Culinary __ Horticulture ___ Book Club

____ At the time of acceptance in The Herb Society of Greater Cincinnati, I will pay the annual dues of \$30 within two weeks.

____ I do not wish to be a member of The Herb Society of Greater Cincinnati but would like a subscription to the quarterly newsletter at an annual rate of \$20.

____ While on the Membership Waiting List, I wish to subscribe to the quarterly newsletter at \$20 per year.

ALL CHECKS SHOULD BE MADE PAYABLE TO THE HERB SOCIETY OF GREATER CINCINNATI and mailed to the Membership Chairman at the bottom of this page.

PLEASE PRINT OR TYPE:

Name		Date			
Address					
(Street)	(Ci	ty)	(State)	((Zip)
	ne: () Spouse's first name (Optional) Birthday: Month-Day				
MEMBERSHIP CHAI	RMAN				
Sandra Manteuffel	69 Locust Hill Road	Cin	cinnati, OH 45245	513-752-8233	3 ChiveChick@aol.com
Date received by cha	irman:		check #		