

SOUTH CENTRAL REGION LIFE MEMBERSHIP APPLICATION

Life Membership #: _____

(To be added by SCR Life Membership Chairman)

State Garden Club ☐ Arkansas ☐ Oklahoma ☐ New Mexico ☐ Texas (Check One)

Name of Applicant: _____ Phone: _____

Address: _____

Email Address: _____

Club Name: _____

Given By: _____

Presentation Date: _____

Summary of Garden Club Accomplishments: _____

If this is a gift or a surprise, Send to: Name: _____

Address: _____

Phone: _____ Email address: _____

Name and Email address of your state Life Membership Chairman: _____

Applicant Wishes to Receive SCR Life pin? Yes ☐ No ☐ (Check One)

LIFE MEMBERSHIP FEE \$50.00 Pin: \$5.00 AMOUNT ENCLOSED: \$ _____

Make check payable to **South Central Region Garden Clubs, Inc.**

And mail with form to SCR Life Membership Chairman (address below)

PLEASE ALLOW ONE MONTH FOR PROCESSING

SCR Life Membership Chairman:

Lee Taylor
1155 28th Street
Hondo, Texas 78861
(210)260-4649 or (830)741-2289
hainiac@swbell.net