

AFRICAN VIOLET COUNCIL OF FLORIDA 2017 MEMBERSHIP APPLICATION

Membership payments due January 1st

Delinquent February 1st

Expires March 1st

Full Name: _____

Email: _____

Home PH: (_____) _____ Cell PH: (_____) _____

Street Address: _____

City: _____ State: _____ Zipcode: _____

Birthdate - Month/Day: _____ New Membership: ___ Renewed Membership: ___

My local club is: _____ in _____

Please check the following statements that apply to you:

_____ I am a charter member of the African Violet Council of Florida (AVCF)

_____ I am an honorary member of the African Violet Council of Florida (AVCF)

_____ I am a member of the African Violet Society of America (AVSA)

_____ I am a Life Member of the African Violet Society of America (AVSA)

_____ I am an AVSA Judge

Please circle appropriate Judge's status: Student Advanced Senior Master Teacher

_____ I am a member of DIXIE African Violet Society (DAVS)

_____ I am Life Member of DIXIE African Violet Society (DAVS)

_____ I am a member of the Gesneriad Society _____ I am an official Gesneriad Judge

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Note to Affiliated Clubs: Please fill out the following information:

Name of Organization: _____

Name of Current President: _____

Number of Members: _____ Circle Is Your Club is Covered by Insurance: Yes or No

Club Meeting Time/Days/Dates _____

Club Meeting Address: _____

Name of Current Treasurer: _____

Name of Current Vice-President: _____

Name of Current Secretary: _____

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Class of Membership: _____ Individual Membership is \$10.00

_____ Affiliated Club Membership is \$15.00

_____ Commercial Membership is \$15.00

_____ Honorary membership given to all past AVCF Presidents

_____ A one year honorary membership is given to the AVCF Show Sweepstakes Winner.

_____ Free membership for affiliate club member first time Blue Ribbon Winner.

All Honorary members please fill out this form for inclusion in the AVCF directory. Thank you!

**Please make your check payable to African Violet Council of Florida for the appropriate amount (see above) and mail this form and your check to AVCF Treasurer:
Sharon Gartner, 5036 Paradise Pond Lane, Jacksonville, Florida 32207**