

*Windward Orchid Society Membership
for July 1, 2020 to June 30, 2021*

Please complete and mail the form below with a check payable to WOS or Windward Orchid Society.

Renewal **WOS APPLICATION** **New Member**

Mail to: Windward Orchid Society, Inc. P.O. Box 23, Kaneohe, HI 96744
Or bring it to the General Meeting.

Name(s): _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ Work: _____

E-mail: _____ Date: _____

Amount Enclosed: _____ Paid By: _____ Check No. _____ Cash: _____ Credit Card: _____

Regular Membership - \$25.00

Regular & Associate (Partner) Membership - \$35.00

Associate (Partner only) Membership - \$10.00

Lifetime Membership \$300.00