Wildflower Society of Newfoundland and Labrador

Membership Form	
Name	
Street/PO Box	
Town/City	Province/State
	Postal Code
Telephone (H)	
E-mail address	
(For Family Memberships)	
Renewal or New Membership/s (in	adicate one)
Total enclosed or E-Transferred \$_	
Date	
\$20 for a Family Membership. Fee Fees can be paid by E-Transfer at:	es paid in spring extend to the next year.
Please email new membership form	ns to <u>karenherzberg@warp.nfld.net</u> at the same time. If you are nformation is the same as previous, please just note that on your E-
If you are sending your new mem	bership form or renewal by mail, please send with your cheque to
Membership Secretary Wildflower	Society of Newfoundland and Labrador
c/o MUN Botanical Garden	
Memorial University of Newfound	land
St. John's, NL, Canada, A1C 5S7	
A receipt will be sent to you by e-	mail.

Please contact Karen Herzberg, Membership Secretary, at karenherzberg@warp.nfld.net if you have any questions, or if you are renewing any questions concerning the status of your membership. A receipt will be sent to you by e-mail.

The Sarracenia will be sent by email.