

Central Ohio Orchid Society

Membership Application (Circle one: New or Renewal)

Name(s) _____

Address: _____

City/State/Zip _____

Telephone _____ Email _____

Homepage URL _____

I grow my orchids (circle one):

at Windowsill in a Greenhouse Under Lights

I have approx. _____ orchids and have been growing orchids for
_____ years. Special orchid interests: _____

___ I am a member of Franklin Park Conservatory

___ I am a member of the American Orchid Society

Yearly dues enclosed (circle one): \$15 Individual \$20 Family

Make checks payable to: Central Ohio Orchid Society

Print this application, complete it and mail with dues to:

Rich Wagener
2739 Clime Rd.
Columbus, OH 43223