

Southwest Florida Orchid Society – Dues Form

Please complete form and mail together with a check made payable to SWF Orchid Society to:

Carol Warrell
13150 Parkline Drive
Fort Myers, FL 33913

Date: _____

PLEASE PRINT:

_____ New

_____ Renewal

_____ Single (\$25.00)

_____ Household (\$35.00)

Name: _____

Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Alternate Phone: _____

E-mail: _____

_____ Please send my Newsletter by e-mail. _____ Please send my Newsletter by regular mail.

Would you be interested in serving the Society in any capacity? _____ Yes _____ No