



BONSAI SOCIETY of PORTLAND

Membership Application:

Membership Type (Required)

- New Individual Membership \$30
- New Family Membership \$40 (same household)
- Renewing Individual Member \$30
- Renewing Family Member \$40

Member Contact Information:

Primary Member First Name

Family Member First Name (if applicable)

Primary Member Last Name

Family Member Last Name (if applicable)

Primary Member Nickname

Family Member Nickname (if applicable)

Street Address

City, State, Zip

Email Address

Alternate Email Address

Note: Club newsletter is sent by email unless other arrangements are made.

Primary Phone

Alternate Phone

Roster Information:

BSOP provides membership contact information on its secure website.*

Please indicate your authorization to include the following:

- Home Address
- Primary Email Address
- Primary Phone Number

** Information will not be released outside of club membership.*

Optional Information:

Please check any committies upon which you may be interested in serving:

- | | |
|--|--|
| <input type="checkbox"/> Programs (set up, organization, AV) | <input type="checkbox"/> Mentorship (set up, programs, organization) |
| <input type="checkbox"/> Library (organization, inventory) | <input type="checkbox"/> Membership (greeters) |
| <input type="checkbox"/> Newsletter (edit, publish, writing) | <input type="checkbox"/> Web/Social Media (maintenance, monitoring) |
| <input type="checkbox"/> Hospitality (set up, coffee, cookies) | <input type="checkbox"/> Executive Board (2-year terms) |
| <input type="checkbox"/> Other _____ | |

Additional comments, such as amount of bonsai experience, services you provide, or other critical information:

**Make check payable to BSOP
and mail with application to:**

BSOP Membership, Attn: Jan Hettick
6707 SW Pine St, Portland, OR 97223