

**THE GARDENERS OF AMERICA
MEN'S GARDEN CLUBS OF AMERICA**

**P.O. Box 241
JOHNSTON, IA 50131-0241
515-278-0295**

LIFE MEMBERSHIP FORM

The affiliated club of _____ is proud to submit as a **LIFE MEMBER** of TGOA/MGCA the following person:

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

BIRTHDATE: _____

PHONE: (____) _____ EMAIL: _____

ALL AGES: \$200.00 AMOUNT ENCLOSED: \$ _____ CHECK: __ CASH: __

MAIL CERTIFICATE TO:

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

SUBMITTED BY: _____

DATE: _____ CLUB: _____