



***EASTERN AIRLINES ORCHID CLUB***

**MEMBERSHIP APPLICATION**

(Please Type or Print)

Badge Number \_\_\_\_\_ (To Be Completed by Membership Chair)

Badge Given On \_\_\_\_\_ (To Be Completed by Membership Chair)

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

HOME PHONE # \_\_\_\_\_ CELL PHONE # \_\_\_\_\_

E-MAIL ADDRESS: : \_\_\_\_\_

May we publish Phone Numbers in Membership directory? YES \_\_\_\_\_ NO \_\_\_\_\_

May we publish E-mail Address in Membership Directory? YES \_\_\_\_\_ NO \_\_\_\_\_

How long have you been interested in orchids? \_\_\_\_\_

Approximate number of plants you own? \_\_\_\_\_

Are you acquainted with a member of this club? YES \_\_\_\_\_ NO \_\_\_\_\_

If yes, who? \_\_\_\_\_

SIGNATURE \_\_\_\_\_

Dues Renewal Fees Paid Each January

Online Payment Per Member = \$25.00 + \$2.00 (Handling Fee)

Application Return E-mail Address: [ealoclub@gmail.com](mailto:ealoclub@gmail.com)