**Northwest Georgia Daylily Society**

**Membership Form**

**We meet January through October with most meetings held at Stiles Auditorium at 320 W Cherokee Avenue, Cartersville GA 30120. For additional information, please visit the club website @ www.nwgds.org.**

**Application Year \_\_\_\_\_\_\_\_\_\_**

**Please complete the information requested below: Please Print**

**Primary Member Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Member of AHS/ADS Y or N**

**Spouse\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Member of AHS/ADS Y or N**

**Youth Membership Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Member of AHS/ADS Y or N**

**Mailing Address (City State Zip)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Primary Member Cell\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Spouse Cell\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Primary Member Email Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Spouse Email Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Dues are paid annually and due before January 1st. Dues are $10 per individual/ $15 for Family.**

**AHS/ADS dues are $25 individual/$30 Dual Membership/$10 Youth**

**Amount Paid Today\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Please complete the NWGDS Photography Release Form below:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(primary member)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(spouse or youth member) DO or DO**

**NOT give NWGDS permission to use my photos on their website, Facebook page, and**

**online photo gallery. (Circle Choice)**

**Primary Member Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Spouse or Youth Member Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Mail membership form and dues to: Doris Bishop 35 Northwoods Drive NW Cartersville, GA 30121**