REGULAR MEMBERSHIP RENEWAL FORM /EMAIL

Name____________________________________________________Member #____________________________

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Confidentiality? YES  NO
Members’ addresses appear in the ARS Membership roster. Checking “NO” will remove email & phone information

____ Check here if you do not wish a physical copy of the Journal ARS (electronic version is available)

Please circle one:

REGULAR ..........................................................................................................................  $  40

STUDENT ...(E-journal only)................................................................................................ $  10

COMMERCIAL/CORPORATE (includes web page on ARS website and 5% discounts on advertising rates).............................................................. $  90

SUSTAINING (your opportunity to be a benefactor of ARS – additional unrestricted commitment to our mission)................................................................. $  75

SPONSORING (a greater statement for the benefactor, offering your unrestricted support)................................................................. $  150

LIFE MEMBERSHIP – INDIVIDUAL make a lifetime commitment to the Society........ $1,000

LIFE MEMBERSHIP – FAMILY ................................................................................................ $1,500

Make a donation to the ARS General Fund Donation $_________

Honor or Remember someone with a donation to the ARS Endowment Fund Donation $_________

Tax receipts are issued for each donation.

TOTAL US $ ENCLOSED: _____________________

Please return this form with payment to your ARS Membership Chairperson.
Renewals received after December 1st may delay your next Journal.

Thank you for renewing your membership to the American Rhododendron Society