

Kitty Larkin  
*Five Star Membership Chairman*  
W161 N5711 Bette Dr  
Menomonee Falls, WI 53051-5647  
kittysltr@wi.rr.com



## FIVE STAR MEMBERSHIP APPLICATION FORM

Date: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_ E-mail \_\_\_\_\_

State Garden Club \_\_\_\_\_

Environmental Schools Master Status Date: \_\_\_\_\_

Flower Show Schools Master Status Date: \_\_\_\_\_

Gardening Study Schools Master Status Date: \_\_\_\_\_

Landscape Design Schools Master Status Date: \_\_\_\_\_

\_\_\_\_\_  
State President Signature

Where is Certificate to be presented: (please check choice)

aaaNGC National Conventionaa\_State Convention /Meeting \_\_\_\_\_  
Date of Meeting

Please complete application form and forward to the Five Star Membership Chairman.

\_\_\_\_\_  
Kitty Larkin, 5 Star Chairman

\_\_\_\_\_  
Date