



NGC FIVE STAR MEMBERSHIP APPLICATION FORM

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

Date _____

Name of Applicant _____

Address _____

City _____ State _____ Zip code _____

Phone _____ E-mail _____

State Garden Club _____

Environmental Schools Master Status and Good Standing Dates:

Flower Show Schools Master Status and Good Standing Dates:

Gardening Study Schools Master Status and Good Standing Dates:

Landscape Design Schools Master Status and Good Standing Dates:

Applicant Signature _____

Where is Certificate to be presented? (Please, check one.)

NGC National Convention State Convention/Meeting Date of Meeting _____

Please complete application form, send to the Five Star Membership Chairman and send a copy to your State President.

Kitty Larkin, Five Star Chairman

Date