



**CANADIAN ROSE SOCIETY - GIFT MEMBERSHIP APPLICATION FORM**

(Annual Memberships are from 1<sup>st</sup> January to 31<sup>st</sup> December)

Newsletters and announcements are emailed to members

**Date of Application:** \_\_\_\_\_

**Single Membership** \$20 \$ \_\_\_\_\_

**Family Membership** – all living at the same address \$25 \$ \_\_\_\_\_

A charitable donation of \$10 or more \$ \_\_\_\_\_

(You will receive an Official Receipt for Tax Purposes for all donations)

**Canadian or US Dollars are acceptable** **Total:** \$ \_\_\_\_\_

**Gift Membership is from: (Name)** \_\_\_\_\_

**(Email)** \_\_\_\_\_

Are you an **Accredited Rose Judge**: YES: \_\_\_\_\_ NO: \_\_\_\_\_

If a Member of another **Rose Society, domiciled in Canada**, please enter its name (**ONLY one, please**)

Would you be interested in being a CRS Director or Volunteer: YES: \_\_\_\_\_ NO: \_\_\_\_\_ MAYBE: \_\_\_\_\_

**CONTACT INFORMATION FOR THE PERSON RECEIVING THE GIFT**

*(Please print clearly.)*

**Name:** \_\_\_\_\_

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

**City:** \_\_\_\_\_

**Province or State:** \_\_\_\_\_ **Postal Code:** \_\_\_\_\_ **Country:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_

**Email address:** \_\_\_\_\_

*For more information contact our society at [members@canadianrosesociety.org](mailto:members@canadianrosesociety.org)*

**Payment can be made by:**

**CHEQUE:** Payable to the Canadian Rose Society and mailed to:

Treasurer, Canadian Rose Society, c/o 233 Covewood Circle NE, Calgary, AB, T3K 5S7, Canada

**E-TRANSFER OR PAYPAL:** Use the on-line application form and follow the instructions.

[www.canadianrosesociety.org/gift-membership/](http://www.canadianrosesociety.org/gift-membership/)