

Master Gardeners of North Alabama, Inc Membership Form

Please complete this form, sign, and make a check out to MGNA

If this form and a check are not given directly to someone on the membership committee, mail the form and check to:

Elouisa Stokes, MGNA Membership Chair 2415 Glenn Street Huntsville, AL 35801

If you would like your membership card mailed to you, include a self-addressed, stamped envelope. Otherwise, you may pick the card up at the next MGNA meeting. Please contact membership@mginfo.org if you have any questions.

Please print neatly, filling out the entire form. Name (preferred usage) Mailing Address _____
 City ______State _____Zip Code _____
Phone Mobile Home (if applicable) As a member you will receive information via email from news@mginfo.org. Visit the MGNA website at mq.aces.edu/madison Class Information I took the Master Gardener class in: Year _____ Spring ☐ Fall ☐ **Membership Details** $\$ _____ My Membership Level *Active (\$30) \square OR Associate (\$40) \square \$_____Contribution to help fund MGNA projects \$_____Contribution to Jane R. Parks Memorial Fund \$_____ Total Enclosed Member Signature ______ Date

^{*}An Active Member must complete 25 hours of volunteer service and 10 hours of Continuing Education Units between January 1st and December 31st of the year.