

**IKEBANA INTERNATIONAL, SAN DIEGO, CHAPTER NUMBER 119
MEMBERSHIP FORM**

Date: _____

Membership Status (check one):

- New Member
 Renewal
 Rejoining
 Transfer from _____

Last Name: _____ **Middle Name:** _____ **First Name:** _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Email: _____

Phone Number(s): _____

Ikebana School (if applicable): _____

Birthday (Month) _____ **Day** _____

Dues: Dues are assessed on an annual basis (July through June) and are due on 1 June. Any person joining the chapter must pay dues for the entire period of 1 July 2016 through 30 June 2017; dues are \$55 and are not prorated. Do **not** send the membership application form and your check to the address listed on the website. Contact the membership chair, Mary Krogh (m.krogh@cox.net) for the correct mailing information and for any additional information.

Additional Information: www.ikebanasandiego.org