

MEMBERSHIP APPLICATION FOR THE RICHMOND AFRICAN VIOLET SOCIETY (RAVS)

Organized in 1948

RAVS Objective: To allow a friendly and beneficial association of persons interested in the propagation, culture, and decorative uses of African violets and other gesneriads and to educate the public through exhibition and cooperation with other horticultural organizations.

Qualification of Members: Any person who is interested in growing and showing African violets and promoting the Society is eligible for membership.

Dues: The annual dues are: \$20.00 for individual membership, \$10.00 for youth membership under 18 years of age, and \$30.00 for joint membership, payable at the June meeting. Individual dues after January 1st are \$10.00 for the remaining year. Dues will be accepted with a completed application.

Date: _____

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

E-Mail: _____

Birthday: Month: _____ Day: _____

Spouse's First Name: _____

Emergency Contact: _____ Cell Phone: _____

- How many violets do you have presently? _____
- Are you growing other gesneriads? _____
- Are you a member of the African Violet Society of America? _____
- Are you a member of the Mid-Atlantic African Violet Society? _____
- Are you a member of The Gesneriad Society? _____

Type of Membership:

Individual ____\$20.00 (\$10.00 after January 1st) Joint: ____\$30.00 Youth: ____\$10.00

Please make checks payable to RAVS and mail to:

Richmond African Violet Society
C/O Bill Schmidt, Treasurer
500 Danray Drive
Richmond, VA 23227