



IKEBANA
INTERNATIONAL



Rochester Chapter 53

Membership Form (please print clearly)

Name: _____

Address: _____

Phone: _____

Email: _____

How did you hear about us? _____

Annual Dues for July 1st through June 30th Please choose one:

_____ Full Membership-\$85-includes Ikebana International and local dues

Birth Month: _____ Birth Day _____

_____ First Year Membership Pass-\$40-only includes access to local I. I. Chapter

_____ Associate Membership-\$20-(full membership in another I. I. branch) (Name of I. I. branch with full membership _____)

_____ I hereby agree that any and all documents relating to the *General Meeting* of Ikebana International, including the convocation notice with proxy, will be sent to me by electromagnetic means such as sending email and posting on the I. I. website. (Please put a check mark at the line beginning this paragraph.)

Make check payable to: I. I. Rochester Chapter 53

Mail to: David Williams, 1 Fox Run Lane, Apt 200, Orchard Park, NY 14127