

MEMBERSHIP RENEWAL



<i>Club Representative Notes</i>
Date Form & Dues Received: _____
Dues received by: _____
Check #: _____ Amount: \$ _____
Cash Received: \$ _____

CHECKS PREFERRED. Please make checks payable to TCC. Write names of covered members and your phone number on the check. **CASH** payments must be made in person to the Membership Chair or Treasurer at an official meeting or club event. **DO NOT MAIL CASH.**

Mail renewal form with a check to:

TCC
c/o Frances Alexander
1332 Landfall Drive
Wilmington, NC 28405

<input type="checkbox"/> \$20 INDIVIDUAL RENEWAL
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<input type="checkbox"/> \$25 FAMILY RENEWAL
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OPTIONAL CONTRIBUTION, unrestricted or for a club activity:

Amount (and purpose, if for an activity): \$ _____, _____

PLEASE PRINT

Member 1: Preferred Name: _____	Last Name: _____
Street Address: _____	City: _____ State: _____ Zip: _____
Email Address: _____	Primary Phone: _____
Do you communicate by text? <input type="checkbox"/> NO <input type="checkbox"/> YES on Mobile Number: _____	

ADDITIONAL INFORMATION REQUIRED FOR FAMILY MEMBERSHIP ONLY

Member 2: Preferred Name: _____	Last Name: _____
Street Address: _____	City: _____ State: _____ Zip: _____
Email Address: _____	Primary Phone: _____
Do you communicate by text? <input type="checkbox"/> NO <input type="checkbox"/> YES on Mobile Number: _____	
Member 3: Preferred Name: _____	Last Name: _____
Street Address: _____	City: _____ State: _____ Zip: _____
Email Address: _____	Primary Phone: _____
Do you communicate by text? <input type="checkbox"/> NO <input type="checkbox"/> YES on Mobile Number: _____	

PLEASE NOTE: All memberships must be renewed in September. To receive the club discount for a camellia order, your membership must be in good standing