



PHOENIX ROSE SOCIETY

Membership Application

Annual Membership Dues (includes one member of same household) *

- Fiscal year is January 1 through December 31.
- Payment can be made with a Check, payable to **The Phoenix Rose Society**.

____ New Member - \$25.00 ____ Renewal / Existing Member - \$25.00

- Donation towards Valley Garden Center Rose Garden of \$ _____

First Name* _____ Last Name* _____

Email* _____

Address*

Street 1: _____

Street 2: _____

City: _____

State: _____ Zip Code+4: _____

1. Are you a member of the American Rose Society? * ____ Yes ____ No ____ I'd like to learn more
2. Are you a certified Rosarian? *
 ____ Consulting Rosarian ____ Master Rosarian
 ____ I would like to become a certified Rosarian ____ Not Interested
3. Would you like to volunteer to help deadhead the roses at the Valley Garden Center Rose Garden? *
 ____ Yes ____ No

If this is a gift membership, then please complete the following:

Name: _____ Email: _____

Membership Dues should be mailed to:

Phoenix Rose Society
c/o Lauren Toth, Membership Chair
2929 W Tumbleweed Dr.
Glendale, AZ 85085