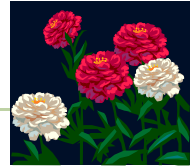


Mid-Atlantic Peony Society



Mailing Address: c/o Gail Neil Neiman
PO Box 478
Southeastern, PA 19399
Gail@midatlanticpeony.org

Membership Application

Dues: \$ 20.00 annually based on calendar year
Make check or money order payable to **MAPS**.

Contact Information

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	

Your name and e-mail address will be published in our member's directory, distribution of which is limited to paid members only. If you prefer *not* to have your contact information published in the directory, please check this box.

Interests

Tell us in which areas you are interested in volunteering with the Society. *Optional - for information purposes only.*

- Administration
- Computer skills
- Web Design & Management
- Field work

- Fundraising
- Phone Bank
- Newsletter
- Volunteer Coordinator
- Other

Skills, Hort Experiences and Interests

Summarize skills, interests and/or hort experiences you have acquired from employment, previous volunteer work, or through other activities, including hobbies.