

South Coast Cactus and Succulent Society Membership Application

New and Renewing Members: You can either fill in the information on a computer then print, or print first then write in the information. Please sign after printing.

Make check payable to: **SCCSS**
Mail form and payment to: **Bernard Johnson,
629 18th Street, Manhattan Beach, CA 90266**

Date mm/dd/yy:

Name:

Address:

City: State: Zip:

Email Address: Phone:

Our membership year begins January 1 and ends December 31.

- \$20.00 Membership: Renewal or New Member
 Lifetime Member Honoree: No Charge
 I am a Member of CSSA – Cactus and Succulent Society of America

The above information will be included in our Membership Directory (for use by members only). If you wish to exclude any of the above information from the Directory, please indicate your exclusions here.

Do not publish my: Email Phone Address

SCCSS is a 501 3C organization. In addition to your dues you may make an optional charitable donation to support our philanthropic endeavors as well as the operating expenses of the organization. If you choose to do so, please indicate the amount _____. You will receive a donation receipt. Thank you.

I agree to have my information published in the Membership Directory with noted exceptions.

Signature Date: _____

Sally Fasteau, Membership Chair
sallyfasteau@cox.net
310-544-1313

ms-20211209

Date _____ Check # _____ Cash _____ Amount _____ Donation _____ Receipt _____