



**Alumni Association
of the
Niagara Parks Commission School of Horticulture**

Membership Renewal Form

(Membership Deadline: March 1st) Please Send Your Dues Today!

Name: _____ Graduation Year: _____

(Please complete the appropriate area on the next page, if your contact information has changed)

Membership Options:

Please **Circle** the type of membership you wish to purchase and Blue Book format you prefer.

	<u>One Year</u>	<u>Two Years (save \$5.00)</u>	
Graduate	\$75.00	\$145.00	
Two Married Graduates	\$100.00	\$190.00	Spouse: _____
Fellowship	\$85.00	\$165.00	
Associate	\$100.00	\$195.00	
Blue Book - Digital CD Version	\$ 0.00	\$0.00	
Blue Book - Printed Version	\$2.75	\$5.50	

Donations:

I would like to make a donation of \$_____ to help support the **Alumni Association**.

I would like to make a donation of \$_____ to help support the **Legacy Garden**.

I would like to make a donation of \$_____ to help support the **Alumni Foundation**.

I prefer not to have my name publicly recognized for my contributions.

Payment Details:

Payment total: _____

Payment type:

- Cheque – payable to **Alumni Association of NPC School of Horticulture**
- Credit Card

Visa # _____

Expiry Date: _____

MasterCard # _____

Expiry Date: _____

Signature _____

Please send this Membership Form and the Blue Book Information Sheet with your payment details or cheque to:

Karen Michaud, Executive Secretary, Alumni Association of the NPC School of Horticulture

8 Hahn Avenue, Cambridge, Ontario N3C 2X9 npcsha@gmail.com

Thank you for your membership!

Alumni Association of The Niagara Parks Commission School of Horticulture

Blue Book Information Form

In preparation for the next Blue Book, the Alumni Association would like ensure that we have the most up-to-date information. Please include a separate sheet for each Graduate spouse. Please do not put this away. Mail it today!

Please check this box if there are no changes to your information.

Current Last Name:

Previous Last Name (2):

First Name:

Class of:

Veteran:

Alumni Board Member (3):

Foundation Board Member (3):

Spouse:

Degrees/Diplomas/Certifications (4):

Employment

Job or Title (5):

Company/Organization Name:

Address:

Address:

City:

Province/State:

Country:

Postal Code/Zip:

Business Phone:

Business Cell Phone:

Business Fax:

Business Email:

Business Website:

Home

Address:

Address:

City:

Province/State:

Country:

Postal Code/Zip:

Home Phone:

Home Cell Phone:

Home Fax:

Home Email:

Home Website:

Notes:

1. There are limitations to the space available for each item so the Association may use abbreviations or otherwise edit your information.
2. Note that there are two categories for last name. "Previous Last Name" is your name used as a student at the NPC School of Horticulture (e.g. maiden name).
3. Includes past or present member.
4. Includes degrees, other diplomas, professional certifications and any other post secondary education.
5. Specify your job, title, or field of expertise. Provide this even if you are retired, including the word "retired."
6. If you were a veteran, please indicate years of service and regiment. *The use of the poppy symbol has been approved by the RCL Dominion Command and it will be placed beside your name.*

The Alumni Association of the Niagara Parks Commission School of Horticulture (Association) collects personal information under the authority of the Freedom of Information and Privacy Act. Personal information collected by the Association may be used to create and maintain a public record of the Association graduates or disclosed in order to execute the various functions of the Association and to administer the various relations between the Association and Alumni. If you have questions about this collection, or to instruct the Association to refrain from using your personal information, please contact Executive Secretary, Karen Michaud. npcsha@gmail.com