



Victoria Lily Society (VLS) 2025 Membership Form

Name (s): _____

Address: _____

City: _____ PCode: _____ Phone: _____

Email: _____

I am a: Returning Member or New Member

Do you consent to your photo being taken at Club activities and included in our Newsletter? I consent

Do you consent to your phone and email being included in our shared Membership List? I consent

Do you have any particular interests or information you would like to share with us? _____

Please indicate which activities below you would like to help out with:

- | | |
|--|--|
| <input type="checkbox"/> NALS Show & Symposium (July 9 - 13) | <input type="checkbox"/> Meetings – coffee/tea and/or sweets service |
| <input type="checkbox"/> Annual auction (October) | <input type="checkbox"/> Meetings electronics setup |
| <input type="checkbox"/> Annual lily bulb order | <input type="checkbox"/> Meetings driving/car-pooling |
| <input type="checkbox"/> Club lily bulbs stewardship / maintenance | <input type="checkbox"/> Meeting guest speaker suggestions |
| <input type="checkbox"/> HCP Lily Garden maintenance roster | <input type="checkbox"/> Host a garden visit |
| <input type="checkbox"/> Newsletter | <input type="checkbox"/> Field trips |
| <input type="checkbox"/> Membership | <input type="checkbox"/> Library |

Please make your cheque payable to the **Victoria Lily Society**

\$20.00 Annual household membership \$ _____ Cash OR \$ _____ Cheque OR

\$ _____ e-transfer to victorialilysociety@gmail.com Please note whom the payment is for.

Signature _____ Date _____

NOTE: To renew or join by mail send this completed Membership Form and a cheque to:
Karen Madrick, 2852 Inez Drive, Victoria BC, V9A 2J1. Email karenjmadrick@gmail.com
A copy of this form can also be obtained at www.victorialilysociety.ca/about-us/

Victoria Lily Society is a Regional member of the North American Lily Society (NALS)