



THE PHOENIX ROSE SOCIETY Membership Form

Name (print clearly) _____

Address _____

City, State, ZIP+4 _____

(A/C) Telephone _____

*Email (print VERY clearly) _____

This is a gift membership

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

YOUR name _____

YOUR telephone number _____

YOUR email address _____

Donation towards Valley Garden Center of \$ _____

Dues are \$25.00 per family membership, payable to The Phoenix Rose Society.

Complete this form and return to:

Joanna Chamberlain
525 E Wesleyan Dr
Tempe, AZ 85282
480-967-7001

jodayc@cox.net

*Opt-out: Beginning May 1, 2011, the Phoenix Rose Society will begin forwarding member information to The American Rose Society in order that our members receive pertinent and up-to-date information about roses and rose-related news. While the ARS and PRS both have strict policies prohibiting the sale or release of member information, the PRS recognizes that some members may not wish to receive the occasional rosy correspondence from the ARS and that this member may prefer to 'opt out' of this program. While we believe that most, if not all, PRS members would appreciate and benefit from articles, releases and maybe the occasional limited-time discount notice, the Phoenix Rose Society values your privacy and requests your permission to release your name, address and email address to the American Rose Society.

Yes, I've read the fine print and **NO, I still don't want my membership**