

OLDE RIPTON GARDEN CLUB

Visitor Form 2024

Please Print And Bring To A Meeting. Visitor Fee: \$5. Date: _____

Rec'd by: Membership _____ Treasurer _____ Cash or Check # _____

NAME _____

Are you interested in learning more about what our club has to offer?

☐ Not at this time ☐ Yes

Would you like to be added to our club's email list and receive information about future events? ☐ Not at this time ☐ Yes

Email: _____

HOW DID YOU HEAR ABOUT THE SPEAKER/EVENT?

☐ Shelton Hearld

☐ Facebook

☐ Instagram

☐ Plant Sale

☐ Shelton Seed Library

Other _____

Administrative Purposes:

Name of the Speaker/Event _____

Processed by _____ Date: _____