Institutional Membership Application

Institution

Executive Director (Main Contact)

Second Contact (Billing Contact) & Title

Address

City, State, Zip Code

Country

Phone #

E-mail (Main contact)

E-mail (Billing contact)

Website

Please choose the Institutional Category that best reflects your institution:

- Botanic Garden
- Public Park
- Arboretum
- Zoo
- Historic House or Landscape
- Display Garden
- University or College Garden
- Association or Society
- Other ________________

Institution Description (50 words or less)

Dues are calculated on the Total Annual Operating Expense Budget for the garden, excluding special one-time expenses or capital projects.

To calculate dues, use this formula:

\[
\text{Annual Operating Budget} \times 0.001 = \text{Dues}
\]

Maximum dues = $12,000
Minimum dues = $150

Membership Dues $_______________

- Check (made payable to APGA in U.S. Dollars)
- Credit Card (MC or Visa)

Type of Card: ________________________________

Card #: ________________________________

Exp. Date: ___________________ code#: _____________

Signature: ________________________________

With your membership, you can receive up to 25 copies of the Association’s quarterly journal, the Public Garden.

# of Copies requested: ____________

Please return this form to:

American Public Gardens Association
351 Longwood Road, Kennett Square, PA 19348
Tel: 610.708.3010  I  fax: 610.444.3594
membership@publicgardens.org