



## The Garden Club of Kentucky Life Membership Application

Date: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Member of what club: \_\_\_\_\_

Given by (if applicable): \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Date to be presented: \_\_\_\_\_

Kentucky Life Membership Fee is \$50.00

Please make check payable to: The Garden Club of Kentucky, Inc.

Send to the Kentucky Life Membership Chairman:

Sharon Burcham

P O Box 20, Burlington, KY 41005

Email: [Grannyburcham@yahoo.com](mailto:Grannyburcham@yahoo.com)

The fee paid by a Life Member shall be equally divided between State  
Headquarters Capital Fund and Scholarship Fund.