



**THE MICHIGAN GARDEN CLUBS, INC.**  
**APPLICATION FOR STATE LIFE MEMBERSHIP**

(Please print)

Recipient \_\_\_\_\_ Application Date \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State/Zip \_\_\_\_\_

Who is sponsoring this recipient?  Club  Individual  Friends/Family

Garden Club \_\_\_\_\_ District \_\_\_\_\_ Presentation Date \_\_\_\_\_

Location and/or occasion for this presentation \_\_\_\_\_

Club President \_\_\_\_\_

President's Address \_\_\_\_\_ City \_\_\_\_\_ State/Zip \_\_\_\_\_

Person completing this application \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

Name and address where you would like the Life Membership Packet sent: \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State/Zip \_\_\_\_\_

The following information will help the Life Membership Chair compose a one page personal letter to the recipient. The items suggest information that will show the recipient's contributions to your club and community and the reason for the gift. Give as many specific examples as you can.

You may download, copy and complete this form by hand or you may complete the form using Acrobat or other PDF program that allows fillable forms.

Please allow 4-6 weeks for the application to be processed. Sponsor(s) must arrange for an individual to present the Life Membership.

1. When did this recipient join your club? \_\_\_\_\_ Charter member?  YES  NO

2. List offices this recipient has held in chronological order.

3. Club Chairmanships?

4. Special club projects, such as garden therapy, youth gardening, historical gardens, community gardens, fund raisers?

5. Recipient's area(s) of expertise?  Horticulture  Design  Computers  Organization  Other

6. Knowledge/Talents shared in workshops, programs or other ways?
  
7. District and/or State level chairmanships or offices?
  
8. Please check all NGC Schools that apply:  
 Flower Show Judge  Gardening Consultant  Environmental Consultant  Landscape Design Consultant
9. Participation in Flower Shows (Chair, Entries/Exhibits, Volunteer, Graphics)
  
10. Community participation/service?
  
11. Recipient's outstanding traits?
  
12. Recipient's 3 greatest contributions to Club and/or Community?
  
13. Give specific examples or anecdotes.

**APPLICATION FEE: \$100.00**

Please make check payable to **Michigan Garden Clubs, Inc.**

**PIN: \$ 5.00**

**Mail this completed application and check to:**

Virginia Froehlich  
MGC State Life Membership  
8537 Voigt Avenue  
Grosse Ile, MI 48138-1057  
734-675-2944  
[vafroehlich@comcast.net](mailto:vafroehlich@comcast.net)

PLEASE MAKE A COPY OF THE COMPLETED APPLICATION FOR YOUR FILE  
REV. 4/16