



Virginia Professional Florist Association

Membership Investment Form

Please complete and return so we may update our files.

Come and join YOUR State Organization!

Membership Investment-2012 **\$30.00**

Company Name _____

Address _____

City, State, Zip _____

Contact Person _____

Phone# _____ Fax# _____

E-mail Address _____

Business Web Address _____

(Please Check) New _____ Renewal _____

**Become an individual member of Virginia Association of Floral Designers for \$10.00 a year. Receive personal mailing and e-mail updates on area and regional classes, workshops and conferences. Attend VPFA functions at member rates and accumulate points towards State Designer Certification testing.*

Designer Name _____ \$10.00

Designer Name _____ \$10.00

Designer Name _____ \$10.00

Company Membership dues \$30.00

Total enclosed _____

___ Would you like to become a more active member?

___ Would you be interested in serving on a committee?

___ Would you be interested in Serving on the Board of Directors?

___ May we contact you to volunteer for Association events?

Please return check , made payable to VPFA, and the form to:

Ginny Helsing, AIFD, 13008 Mercer Court Chester, Virginia 23836

*Thank you for your participation in **YOUR** Virginia Professional Florist Association*

Visit us at www.vpfa.net or on Facebook at Virginia Professional Florist Association (VPFA)