

Los Angeles Cactus and Succulent Society

	Check boxes of your information you w	vant liste	ed in Roster	Renewal New	
	_				
	Primary member Name:				
	Additional family members:				
add	reesses not listed in Roster				
	Address:				
	City:	_	State:	Zip:	
	Email Address:				
			_		
	Home Phone:	_ [Cell Phone:		
LA	CSS Newsletter the <i>Cactus Chronicle</i> &	announ	cements are dist	ributed via email	
Me	embership dues are paid annually with a	Renewa	al deadline of Dec	cember 31.	
	es paid January 1 thought August 31 cov				
	es paid Sept. 1 through Dec. 31 cover th		·		owing year.
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	How did you hear about us:				
L					
	Membership Dues: Individual:\$20.00/year Family: \$25.00 /year				
	individual.320.00	, yeai	Faiii	ily. \$23.00 / year	
	For PayPal include Name, email address, Cell Phone Number and Home Address				
	Send form and (checks payable to LACSS)	to	LACSS - Membership PO Box 280581		
	Total Paid			e, CA 91328-0581	
For	office use: Date: Cash:		Check #		CR Card: