



Membership Application
Chapter 65
St Petersburg, FL
www.ikebanastpetersburg.com

Please print this form and complete it. Then mail completed copy along with your check as indicated below.

Name Today's Date

- I am a new member entering all information below
- I am a returning member and have no changes to my information from the prior year
- I am a returning member and have entered only updated changes below

Ikebana International Membership Number:

Preferred Address for receipt of Tokyo Magazine:

Address
City State Zip
Email Birthday Month & Day
Telephone Cell

Alternate Address if partial year resident

Address From Month To Month
City State Zip

Membership Type:

- Regular Membership (\$ 80)
- Couples Membership (\$ 120)
- Associate Membership (\$ 20)
- Transfer Membership (\$ 20)

If Couple's Membership:

Spouse Name
Spouse Email
Spouse Birth Month & Day
Spouse Phone Number

If Associate or Transfer:

School:

- Banmi Shofu
- Ohara
- Ichiyo
- Sogetsu
- Ikenobo
- Undecided
- Other:

Home Chapter City

Dues are payable by Check to:

Ikebana International Chapter #65
P.O. Box 424
Pinellas Park, FL 33781