



SOGETSU SAN FRANCISCO
BAY AREA BRANCH

Member Application 2024 - 2025

Name _____

Address _____

(Street) (City)

(State) (Zip)

Home Phone (____) _____ Cell Phone (____) _____

Your instructor's name _____

A. If you have not completed the entire curriculum (Books 1- 5):

I am currently studying Book # _____

B. If you have completed the Sogetsu curriculum (Books 1-5):

Your Flower Name _____

Your "Teachers Certificate" grade _____

Communications and notices: By Email ____ By US Postal Service ____

If you DO NOT wish to be included in a Branch Directory ____

Annual dues are due on April 1st (April 1, 2024 – March 31, 2025)

Regular Member \$ 25 (**\$ 30 IF PAID AFTER MAY 15, 2024**)

Please make your check payable to

**Sogetsu San Francisco
Bay Area Branch**

Mail form and check to

**Sogetsu San Francisco
Bay Area Branch**

Membership

2315 Wooster Ave

Belmont, CA

94002

FOR BRANCH USE ONLY

Check # _____ \$ _____ Dated _____ Cash \$ _____ Recorded _____