

Trial Member Transmittal Form for Local Society

Date _____

Society Name _____

Please note that couples will receive one trial member ID card listing both names. Upon renewing, a joint account should be selected, if both people wish to remain members.

To receive the September/October issue of *American Rose* names must be received no later than August 31st.

To receive the November/December issue of *American Rose* names must be received no later than September 24th.

To receive the January/February issue of *American Rose* names must be received no later than November 12th.

| Name | Address | City | State | Zip | Phone | Email |
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Please mail this form to: American Rose Society, Attn: Laura Pfender, P O Box 30,000, Shreveport, LA. 71130-0030

Email: laura@ars-hq.org

Fax: 318-937-5405.

Submitted by: _____ Title _____