

ALBERTA HORTICULTURAL ASSOCIATION AFFILIATE MEMBERSHIP

YEAR

Name of Soc	Name of Society/Group/Club:					
President:		Email:				
Secretary:		Email:				
Treasurer:		Email:				
General Date	General Date of Meeting (e.g. 1 st Monday of each month):					
General meeting location:						
Name & address of person(s) responsible for handling correspondence: Name: Address:						
Phone No:Email:						
Secondary C	Contact:					
Name:	Phone:	Email:				
☐ I give permission to post limited contact information (contact name, with email and phone number) for affiliate on AHA website Number of Members (Based on membership Dec 31 of previous year)						
Fee: 30 m	Fee: 30 members - \$30.00 Over 30 members - \$1.00 for each additional member to a maximum total of \$75.00					
*Mail comple	te cheque payable to: Alberta Hortical I completed form and remittance to: Judy Bortnik Unit 374, 223 Tuscany Springs Blvd NV Calgary, AB T3L 2M2 Jabortnik2003@yahoo.ca		AHA Use Only			
Unit 37 Calgary		NW	Date paid Amount Receipt No.			
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Alberta Horticultural Association Affiliate Club Member – Annual Report

Please complete this form and submit it to the AHA Treasurer

The information collected will be used to highlight the many activities of our horticultural societies, share ideas and promote affiliates across the province.

	CLUB NAME:				
	GIVE A SHORT DESCRIPTION OF YOUR MEETING FORMAT (E.G. BUSINESS ONLY, SPEAKERS ONLY, COMBINATION OF BUSINESS, WORKSHOPS AND SPEAKERS):				
	SOURCE OF FUNDING (E.G. MEMBERSHIP FEES, SUPPORT OF MUNICIPALITY/AG SOCIETY, SPONSORS, FUNDRAISING – <i>NOTE</i> – <i>DO NOT LIST AMOUNTS</i>):				
	LIST ALL/SOME OF YOUR MEETING TOPICS AND SPEAKERS, AS WELL AS OTHER ACTIVITIES/EVENTS FROM THE PAST 12 MONTHS:				
	DESCRIBE ONE ACTIVITY THAT YOU ARE MOST PROUD OF FROM THE PAST 12 MONTHS:				
	AHA PARTICIPATION - DID YOUR CLUB:				
	HAVE A DELEGATE ATTEND THE ANNUAL GENERAL	MEETING	YES□ NO□		
	HAVE A DELEGATE ATTEND THE ANNUAL CONFEREN	NCE	YES□ NO□		
	DISTRIBUTE THE AHA NEWSLETTER TO YOUR MEMI	BERSHIP?	YES□ NO□		
	APPLY TO THE SPEAKER REIMBURSEMENT PROGRA	M?	YES□ NO□		
	VISIT AND ACCESS INFORMATION ON THE AHA WE	BSITE?	YES□ NO□		
	SUBMIT CLUB EVENTS TO BE POSTED ON THE AHA	WEBSITE?	YES□ NO□		
SEND IN YOUR COMPLETED FORM ALONG WITH YOUR MEMBERSHIP FEES TO: JUDY BORTNIK, AHA TREASURER					

UNIT 374, 223 TUSCANY SPRINGS BLVD NW
CALGARY, AB T3L 2M2 jabortnik2003@yahoo.ca