

# 2018 MEMBERSHIP FORM

- Renewal
- New member
- Gift membership



680 Plains Road West, Burlington, Ontario L7T 4H4  
 P.O. Box 399, Hamilton Ontario L8N 3H8  
 905-527-1158, 1-800-694-4769, Fax: 905-577-0375  
 Email: memberships@rbg.ca

DATE: \_\_\_\_\_

CARDHOLDER NAME 1 MR. MRS. MISS MS.: \_\_\_\_\_

CARDHOLDER NAME 2 MR. MRS. MISS MS.: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ UNIT # \_\_\_\_\_

CITY: \_\_\_\_\_ PROVINCE: \_\_\_\_\_ POSTAL CODE: \_\_\_\_\_

PHONE: \_\_\_\_\_ BIRTHDAY\*: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ (DAY/MONTH/YEAR)

EMAIL: \_\_\_\_\_  PLEASE SEND ME eRBG ONLINE NEWSLETTER

FAVOURITE RBG AREA: \_\_\_\_\_

| Membership category  | 1 year/New*                       | 1 year/Renewal*                   |
|--|-----------------------------------|-----------------------------------|
| <input type="checkbox"/> Single                                  | <input type="checkbox"/> \$84     | <input type="checkbox"/> \$74     |
| <input type="checkbox"/> Single Plus (one guest admission)       | <input type="checkbox"/> \$119    | <input type="checkbox"/> \$109    |
| <input type="checkbox"/> Family-Dual                             | <input type="checkbox"/> \$124    | <input type="checkbox"/> \$114    |
| <input type="checkbox"/> Family-Dual Plus (two guest admissions) | <input type="checkbox"/> \$159    | <input type="checkbox"/> \$149    |
| <input type="checkbox"/> Senior                                  | <input type="checkbox"/> \$64     | <input type="checkbox"/> \$64     |
| <input type="checkbox"/> Senior Plus (one guest admission)       | <input type="checkbox"/> \$94     | <input type="checkbox"/> \$94     |
| <input type="checkbox"/> Senior-Dual                             | <input type="checkbox"/> \$99     | <input type="checkbox"/> \$99     |
| <input type="checkbox"/> Senior-Dual Plus (two guest admissions) | <input type="checkbox"/> \$129    | <input type="checkbox"/> \$129    |
| <input type="checkbox"/> Youth (12 to 18 years of age)           | <input type="checkbox"/> \$49     | <input type="checkbox"/> \$44     |
| <input type="checkbox"/> Organization                            | <input type="checkbox"/> \$164    | <input type="checkbox"/> \$154    |
| <input type="checkbox"/> <i>Paradise Found</i>                   | <input type="checkbox"/> \$30     | <input type="checkbox"/> \$30     |
| <input type="checkbox"/> Additional Guest Pass                   | <input type="checkbox"/> \$35 ea. | <input type="checkbox"/> \$35 ea. |

Number of children associated with this membership: \_\_\_\_\_

(\*LIST PRICE INCLUDES HST)

### Gift membership from:

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ PROVINCE: \_\_\_\_\_ POSTAL CODE: \_\_\_\_\_

PHONE: \_\_\_\_\_

Mail membership cards to:  GIFT PURCHASER  MEMBERSHIP RECIPIENT

Please send renewal notice to:  GIFT PURCHASER  MEMBERSHIP RECIPIENT Gift folder given:  Yes  No

Admission discount: \$ \_\_\_\_\_

I would like to make a charitable contribution of: \$ \_\_\_\_\_ CHARITABLE REGISTRATION: 13350 0850 RR0001

**Grand Total: \$** \_\_\_\_\_

### PAYMENT METHOD — OFFICE USE ONLY

- CHEQUE (payable to Royal Botanical Gardens, enclosed)
- Please charge my:  VISA  MASTERCARD  AMERICAN EXPRESS

CARD NO: \_\_\_\_\_ EXPIRY DATE: \_\_\_\_\_

NAME ON CARD: \_\_\_\_\_ DATE: \_\_\_\_\_

\*If you are over 65, you receive senior discounts on your membership and RBG programming.