



**The Plumeria Society of America, Inc.**  
**P.O. Box 22791**  
**Houston, TX 77227-2791**

[www.ThePlumeriaSociety.org](http://www.ThePlumeriaSociety.org)

**PSA Membership Form**

Please fill in the following information:

1. Check one of these:

- Yes, I am interested in joining the Plumeria Society of America, Inc
- Please renew my membership in the PSA.

2. Contact information:

Name: \_\_\_\_\_

Address : \_\_\_\_\_

*( new member only )*

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Country: \_\_\_\_\_

Phone number: \_\_\_\_\_

e-mail address: \_\_\_\_\_

3. Type of membership, *please see the PSA By-Laws for details:*

- Regular membership, with voting right, dues are 20 U.S.D. per year.
- Associate membership, without voting right, dues are 15 U.S.D. per year.
- Individual membership or  family membership, same dues, one vote per family (applicable).

4. Regarding to publishing your name in the PSA annual Membership list, please circle below *(to comply with personal information and privacy requirements):*

Publish : Name ----- Y ----- N  
 “ Address ----- Y ----- N  
 “ Telephone # : ----- Y ----- N  
 “ Email address: ----- Y ----- N

5. And check one of these: *[if neither box is marked your answer will be recorded as YES]*

- YES, add my email address to *ThePlumeriaSociety email list at YahooGroups.com*
- NO, do not add my email address to *ThePlumeriaSociety email list at YahooGroups.com*

Date: \_\_\_\_\_ Initial: \_\_\_\_\_

*Please send this completed application form, along with a check for the appropriate dues, payable to The Plumeria Society of America, INC., to the above mail box. You will receive a confirmation PostCard from the PSA Membership Committee shortly after sending in your form. To read the PSA By-Laws (question #3), please go to the PSA Website then click on the tab "About the PSA". For details about the email list (question #5), please go to yahoogroups.com then search for ThePlumeriaSociety. Thank you very much for your support.*

**For Official Use Only :**

**Treasurer:**      \_\_\_ Cash or Check # \_\_\_\_\_ \$ \_\_\_\_\_ Date: \_\_\_\_\_ Initial: \_\_\_\_\_

**Membership Committee:** Member I.D. # : \_\_\_\_\_ Date: \_\_\_\_\_ Initial: \_\_\_\_\_