



The Plumeria Society of America, Inc.

P.O. Box 22791

Houston, TX 77227-2791

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

Yes, Please renew my Plumeria Society of America, Inc Membership

Contact information:

Name: _____

Address : _____

City: _____ State: _____ ZIP Code: _____

Country: _____

Phone number: _____

e-mail address: _____

2. Type of membership:

a. Membership, with digital newsletter, \$35.00 U.S.D. per year.

b. Membership with printed newsletter, \$70.00 U.S.D. per year

3. 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

For Official Use Only :

Treasurer: _____ Cash or Check # _____ \$ _____ Date: _____ Initial: _____

Membership Committee: Member I.D. # : _____ Date: _____ Initial: _____