



## APPLICATION FOR ASSOCIATE MEMBERSHIP

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
\_\_\_\_\_ Email: \_\_\_\_\_  
Business Name: \_\_\_\_\_ Website: \_\_\_\_\_

### Associate Member:

This category of membership is available to those who wish to support the VSLD and who are engaged in related professions, but are not actively involved in landscape design. This is a non-voting membership category.

### **Professional Endorsement** (One current certified VSLD member required.)

*I am acquainted with the applicant and honestly believe that the individual will be an asset as an Associate Member of the VSLD.*

Name \_\_\_\_\_ Date \_\_\_\_\_  
Name of Business \_\_\_\_\_ Address \_\_\_\_\_  
Phone # \_\_\_\_\_  
Signature \_\_\_\_\_

Please submit this application form and a check payable to VSLD for the annual membership dues of \$60.00.

### **Mail to:**

Janet Baruch, VSLD Membership Chair  
Greenway Gardens  
23 Towana Rd  
Richmond, VA 23226

(804) 357-0255  
[greenwaygardens@aol.com](mailto:greenwaygardens@aol.com)

**Applicant's Statement:** I hereby apply for membership in the Virginia Society of Landscape Designers and in so doing agree to observe all rules and regulations of the Society. I further agree to conduct my professional affairs at all times based on honesty, fairness, and the highest standards of quality.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_