

BROMELIAD SOCIETY OF SOUTH FLORIDA
BSSF, Inc.
2019 MEMBERSHIP RENEWAL

(PLEASE PRINT) NAME(S)

(Couples - please include BOTH first names)

ADDRESS: _____

CITY _____ STATE _____ ZIP _____

TELEPHONE _____

ADD'L. TEL. _____

Year Joined BSSF: _____

Referred by: _____

Include e-mail address in the roster? (Y/N) Yes No

E-mail BromeliAdvisory? (Y/N) Yes No (You will not receive a hard copy)

EMAIL _____

IF ANY OF THE ABOVE INFORMATION IS DIFFERENT FROM LAST YEAR,
PLEASE **HIGHLIGHT** OR UNDERLINE

Please renew my(our) membership in the BROMELIAD SOCIETY OF SOUTH FLORIDA
for the period of March 1, 2019 to February 28, 2020.

Check the category: Single membership \$25.00
 Dual membership \$35.00

Dual members enjoy all the privileges of active membership, but receive only one
copy of the BromeliAdvisory.

**DUES MUST BE RECEIVED BY MARCH 1, 2019, IN ORDER FOR YOU TO BE
INCLUDED IN THE 2019 ROSTER**

Please mail completed form and check

(Payable to BSSF, Inc.) to:

Maureen Adelman
9421 SW 134 Street
Miami, FL 33176

Or E-Mail this form to:

mhadelman@comcast.net

You can pay up to 5 years at the rates
described above. All payments are
NONREFUNDABLE