

NORTHWEST LOUISIANA MASTER GARDENERS
CERTIFICATION RENEWAL
January 1, 2024 thru December 31, 2024
PLEASE FILL IN ALL BLANKS

Name: _____
Address: _____
Zip: _____ Email: _____
Home Phone: _____ Cell Phone: _____
Year Graduated MG class: _____

Would you like to be included in the NWLAMG email group ____ YES ____ NO
Would you be willing to serve on a committee? ____ YES ____ NO
If so please name committee: _____

----- **Choose one category** -----

_____ I plan to continue my work as a Master Gardener, operating under the original guidelines, and agree to provide the Master Gardener Program with another 20 hours of service, and 6 hours of self-improvement educational hours.

(\$25 ACTIVE MEMBER, \$15 If Submitted Before October 11th 2023 (early-bird))

_____ I have finished the year in good standing but wish to become an inactive member with hopes to become active again in the future. Keep my name on the newsletter and email lists. **(\$50 INACTIVE MEMBER)**

_____ I would like to remain a member but have not completed my hours and understand there is a 5 year limit for using this option. **(\$75 SHORT HOURS, ACTIVE MEMBER)**

_____ Please cancel my membership; I am unable to participate in the future. Please also remove my name from the newsletter and email lists. **(CANCEL MEMBERSHIP)**

_____ I am applying for lifetime membership (Graduated before 2014 and 10 years of service completed in good standing). NWLAMG Board will notify me of approval. No dues if approved. **(LIFETIME APPLICANT \$0)**

_____ I have been granted Lifetime Membership status. **(LIFETIME \$0)**

----- **Additional categories** -----

_____ I would like to prepay for my 2024 Le Tour des Jardins tickets **(\$100)**

_____ I would like to prepay for Get It Growing Lawn and Garden Calendar **(\$10 EA; indicate total number of calendars requested in the blank)**

Total amount due: \$ _____ Check Number: _____

I understand it is my responsibility to enter and review my volunteer and education hours on LSU AgCenter Hours Reporting System by December 31, 2023. To meet criteria for 2024

Signature: _____ Date: _____

Make checks payable to **NWLAMG** and to be included in the directory turn in with form by **December 31st, 2023 NO EXCEPTIONS!**

**Lynn Burke
305 Cypress Creek Ct.
Shreveport, LA 71106**

5% Fee for Credit Card charge, Early-bird is due at or before the October 11th Meeting