CENTRAL TEXAS IRIS SOCIETY Membership Form

Name to Appear on Membership Roster:			
Name to Appear on Name Tag:			
Address:			
Phone(s): Please specify home, cell Email:			
The annual CTIS Yearbook is only distributed to CTIS members, the American Iris Society (AIS), & AIS Region 17 for affiliation purposes. Please DO NOT publish:			
□ Address; Phone numbers: □ home □ cell; □ Email address			
I currently grow the following: Beardless: Other: Bearded: Beardless: Other: Miniature Dwarf (MDB) Spuria (SPU) I don't know Standard Dwarf (SDB) Siberian (SIB) None Intermediate (IB) Louisiana (LA) Other: Border (BB) Species Miniature Tall (MTB) Species Arils & Arilbred (AB) Image: Arilbred (AB)			
Interests: Growing irises Hybridizing irises Entering iris shows Judging irises Purchasing irises	 Award winning Historic Reblooming Space Ager Novelties 		 Specific color: Specific type: Commerical growing
Favorite color:		Favor	ite named iris:
Favorite holiday:		Favorite cookie:	
Hobbies/organizations (not iris related):		Food allergies/Special diet:	
Occupation:			
Payment of \$10.00 annual membership (September – May): □ Cash □ Check □ Credit Card			