WESTERN NEW YORK IRIS SOCIETY

MEMBERSHIP APPLICATION

Name:		
Address:		
City:	State:	Zip Code:
E-MAIL address:		
Phone (optional):		
WNYIS meetings are held	on the first Sun	day of the month @ 1:30pm
	Reinstein Library 1030 Losson Road Cheektowaga, NY 142	27
 Learn about the num 	nerous types of ir	ises that grow in WNY
 Learn about floral de 	esign	
 Participate in an Iris 	Flower Show	
What are you interested i	n? / What do you	want to learn about?

For more information visit us at www.wnyiris.com or on Facebook!





Website Facebook

Completed forms can be returned to:

Chris Krzal
2814 William Street

Cheektowaga, NY 14227

or EMAIL: cjktoybay@yahoo.com