

FLORIDA FEDERATION OF GARDEN CLUBS, INC.
Pillar of Pride Application
(Must be typed or printed)

Date of Application: _____

POP Number _____
(FFGC use)

Presentation Date: _____

District _____

Surprise? Yes _____ No _____

Code # of Club/Circle _____

Name of Member: _____
(Given Name)

Mailing Address: _____

City/State/Zip _____

Member of Club/Circle or Individual:

Given by: _____
(Must be given by a Club, Circle or District)

Brief description of Honoree's qualifications for membership: _____
(purpose, pride, productivity for progress)

Please make your check for \$100.00 payable to Florida Federation of Garden Clubs, Inc. and mail along with this form to:

Joan W. Pryor,
Pillar of Pride Chairman
862 NE 339th Ave.
Old Town, FL 32680-3410

Tel. 352-542-2211
Email: joanpryor11@hughes.net

NOTE: A MINIMUM OF ONE (1) MONTH IS NECESSARY FOR PROCESSING!

Name and address of person to whom this material is to be sent:

Telephone No. _____ Email: _____