



I would like to join the MCC Gardening Association as an:

- MCC student enrolled in 3 or more credit hours
- MCC Employee
- Community Supporter

Name/Business: _____

Address: _____

City/State/Zip: _____ MI _____

Email address: _____ Web Address: _____

Student ID or last four digits of SS#: _____ (for students only)

Day Phone: _____ Evening Phone: _____

Emergency Contact:

Name _____ Phone: _____

Student Info:

Major: _____ Current GPA: _____

Related Special Skills/Interests: _____

I am available for meetings on days/time: _____

I am joining the MCCGA to:

- Gain Leadership Experience
- Learn more about gardening
- Make friends and attend social gatherings
- Beautify the campus and surrounding community
- Other - please explain: _____

Applicant Signature

Date