



THE HERB SOCIETY OF AMERICA, INC.

9019 Kirtland Chardon Road

Kirtland, Ohio 44094

(440) 256-0514

APPLICATION FOR NEW UNITS

Date _____

NAME OF PROPOSED UNIT _____

GEOGRAPHIC AREA COVERED _____

DATE OF ORGANIZATIONAL MEETING _____

NUMBER OF MEMBERS _____

PROPOSED CHAIRPERSON _____

ADDRESS OF CHAIRPERSON _____

TELEPHONE () _____ E-MAIL _____

Names of members, if any, who already belong to The Herb Society of America:

SIGNATURE OF PROPOSED UNIT CHAIRPERSON _____

PROCEDURE:

Please send a completed copy of this document accompanied by the following items to HSA headquarters.

1. A list of proposed officers or members of the steering committee
2. A list of members, including names and addresses
3. National dues for all new members
4. A copy of the proposed unit's by-laws (may be in draft form)
5. A synopsis of the group's activities (or proposed activities)

The membership chairperson will present the application for approval to HSA's board of directors. The membership chairperson will notify the prospective unit of the board's decision.