



North Country Herbalist Guild

Membership Registration

Name

Address

City

State

Zip Code

Email address

Phone Number

- New Membership – \$30
- Renewing Membership – \$25

Indicate if you would like to receive:

- Monthly email newsletter
- Annual postal mailing

How did you hear about us? _____

Please send this form along with your membership fee to:

North Country Herbalist Guild
P.O. Box 4186
St. Paul, MN 55104