American Orchid Society
Education. Conservation. Research.

American Orchid Society
PO Box 565477
Miami, FL 33256-5477
Phone: (305) 740-2010 Fax: (305) 747-7154

Update AOS Affiliated Society Information

Society Name _____

Society AOS Member No. _____ Expiration Date _____

Contact Information

AOS Rep Name _____

Rep AOS Member No. _____ Expiration Date _____

AOS Rep Email _____

Society Email _____
Must be unique – Not existing AOS Member Email

Public Society Contact Email _____
AOS Rep Email or General Society Email ***ONLY*** – Will be publicly listed on AOS website & OSD

Phone 1 _____
AOS Rep Phone Number(s) ***ONLY***

Phone 2 _____
AOS Rep Phone Number(s) ***ONLY***

Website _____

Meeting Information

Day of the week _____ Time _____

Frequency _____

Meeting Location

Building/Location Name _____

Street Address 1 _____

Street Address 2 _____

City _____

State/Province _____

Postal Code _____ Country _____

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Update AOS Affiliated Society Information

Mailing Address

(For ORCHIDS magazine, donation letters, show kits, etc.)

c/o _____

Street Address 1 _____

Street Address 2 _____

City _____

State/Province _____

Postal Code _____ Country _____

Additional Society AOS Corner Contacts

President Name _____

President Phone _____

President Email _____

Newsletter Editor Name _____

Newsletter Editor Email _____

Note: Only the AOS Representative or the President of the Affiliated Society are able to complete this form. By submitting this form, you agree that you are the AOS Representative or Society President. If any other individual besides the AOS Representative or Society President completes this form, the changes will not be implemented until we receive approval from the AOS Representative or Society President.

Submitted by _____ Title _____